# DOCUMENT RESUME

**ED 165 872** PS 010 222

| | |
|---|---|
| TITLE | Still the Darker Side of Childhood: 78 Things You Need to Know About Texas Children. |
| INSTITUTION | Texas State Dept. of Community Affairs, Austin. Office of Early Childhood Development. |
| PUB DATE | 1 Oct 78 |
| NOTE | 151p.; Revised edition of ED 110 172 ; Parts may not reproduce well due to colored paper |
| AVAILABLE FROM | Early Childhood Development Division, Texas Department of Community Affairs, P. O. Box 13166, Capitol Station, Austin, Texas 78711 (copies are free upon request as long as supply lasts) |
| EDRS PRICE | MF-$0.83 HC-$8.69 Plus Postage. |
| DESCRIPTORS | Child Abuse; *Children; *Demography; Elementary Secondary Education; Environment; Family (Sociological Unit); Handicapped Children; Health; Problem Children; *Regional Characteristics; *Social Services; *State Surveys; *Youth |
| IDENTIFIERS | *Texas |

ABSTRACT

Based on the report of the Interagency Collaboration Project to Improve Services to Children, this book presents 78 facts about Texas children from birth to 18, on topics that range from broad environmental factors to specific handicapping conditions. Amplifying these facts are comments that provide the broader dimensions of cause, effect, scope, and prognosis. Subject areas are: environment, family, health, handicaps, education, troubled youth, child care, hidden children, and services. Each subject area is introduced by a general discussion of related problems. Factual statements based on statistics are given on subsequent pages. Frequently, the facts are given dramatic graphic illustration. The sources of facts and comments are cited. (Author/RH)

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# 70 things you need to know about Texas children.

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## STILL THE DARKER SIDE OF CHILDHOOD

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# STILL THE DARKER SIDE OF CHILDHOOD

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**October 1, 1978**

# PREFACE

Four years ago, we published "46 Things You Need to Know About Texas Children: The Darker Side of Childhood." The book focused on *early* childhood—ages 0-6—and described conditions in family life, health, nutrition, child care, and public services. Response to the book was tremendous. Since that time, we have received many requests to update it.

In the meantime, a statewide steering committee had begun to assess children's needs as part of the Interagency Collaboration Project to Improve Services to Children. Their report forms this second edition of "The Darker Side of Childhood." The major difference is that the scope of the book has been expanded to cover children 0-18. Consequently, this version includes more facts and more subject areas—namely education, troubled youth and handicaps.

We present this book to parents, community leaders and state officials in the interest of providing hard facts about the conditions under which Texas children live. Here are 78 Things You Need to Know About Texas Children.

Jeannette Watson

**Jeannette Watson, Director**
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# *Mother to Son*

*Well, Son, I'll tell you*
*Life for me ain't been no crystal stair*
*It's had tacks in it,*
*And splinters,*
*And boards torn up,*
*And places with no carpets on the floor.*

*Bare.*
*But all the time*
*I'se been climbin' on*
*And reachin' landin's*
*And turning corners*
*And sometimes goin' on in the dark*
*Where there ain't been no light.*
*So, Boy, don't you turn back.*
*Don't you set down on the steps*
*'Cause you find it's kinder hard.*
*Don't you fall now—*
*For I'se still goin', Honey,*
*I'se still climbin'*
*And life for me ain't been no crystal stair.*

*—Langston Hughes*

Life "ain't no crystal stair" for many of the more than 5 million children under the age of 18 in Texas. Much as we would like to think today's children enjoy luxuries no previous generations have had, the fact is a great number are growing up under less than ideal conditions. Some of the problems:

—stress on the family unit, associated with marital troubles, unemployment, lack of parenting skills
—rising numbers of working mothers and their need for quality child care
—increasing reports of child abuse

—persistent poverty and its ills, including malnutrition and lack of health care
—unnecessary outbreaks of childhood disease, and a rise in venereal disease among youth
—a virtual epidemic of teenage pregnancy
—increasing incidence of alcohol and drug abuse among youth
—emotional disturbance among children, and lack of adequate care for them
—continuing numbers of school dropouts
—growing volume of youth crime.

This book documents some of those problems, with statistics gathered from a number of government agencies, research studies, and other sources. The statistics are divided into nine sections: Environment, which sets the stage for how children and families live, Family, the first and most important influence on a child, Health, which determines a child's growth and development, Handicaps—what happens when health is neglected or goes awry, Education, often thought of as the opportunity for all children to get ahead, regardless of their station at birth, Troubled Youth—behavior problems of today's adolescents, Child Care—who cares for Texas children besides families, Hidden Children—those taboo topics no one wants to admit or talk about, and Services—how much is spent for what in tackling problems of children and families.

The statistics are limited in some respects. They do not begin to be comprehensive; there may be other needs of children and families in Texas. Some data are unavailable; the statistics presented here are only as good as raw data from which they come. They are not taken from a single year, but rather the most recent year or time period for which they are available. In some instances, such as arrests or referrals to juvenile court, the statistics do not represent numbers of children but rather the number of times children were arrested or referred to juvenile court. In some other cases, such as abortions, the statistics do not represent actual numbers of Texas children, but instead the best estimates that could be made from available data, national or otherwise. Most important, statistics are not people; they are only numbers. They cannot convey the pain, the frustration, the despair that many Texas children face.

Even so, statistics are useful because they help quantify problems and allow comparisons to be made. Many persons who work in children's programs have asked for these statistics for use in alerting a community to children's needs and making the public more sensitive to the problems of families. Why should Texans care about the needs of children and families? Because what happens in childhood affects what will happen in adulthood. When a child is born with a handicap, that handicap is a lifelong impairment. When a child is deprived of a loving family, that child is a prime candidate for becoming a social misfit. When a child comes to school poorly equipped for learning, that child stands a chance for dropping out later on and having a tough time finding a job.

The thesis of this book is that many social problems have their origin in childhood. Much of the crime, mental retardation, emotional disturbance, physical handicaps, unemployment, and other problems of today can be reduced or averted if appropriate steps are taken in childhood. The key is prevention.

Prevention in its most basic form would mean assuring that children have what they need to develop soundly—medical care, nutritious food, adequate clothing, a safe and sturdy home, a stimulating school, other children to play with, other adults to model after, opportunities to succeed . . . and fail, experiences that will prepare them for the real world. Prevention also means early identification and treatment. The earlier a handicapping condition is recognized, the better the chances of correcting the problem and helping the child lead a normal life.

Prevention is not a new idea. The Texas Legislature and the U.S. Congress have authorized a number of preventive programs in recent years, particularly in the area of preventive health. They include screening for PKU (a hereditary condition that could lead to mental retardation if diet is not corrected), the Women, Infants and Children (WIC) Supplemental Food Program, well-child clinics, and the Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT). Not all counties offer these programs, however, and some programs need expanding. For example, the Texas Legislature authorized a screening program for hypothyroidism (lack of thyroid—a condition which could lead to impairments, including mental retardation), but the program was not funded. The cost of hospitalizing one hypothyroid child for lifetime care would cover the cost of the screening program for two years. Another example of a program that needs to be expanded is comprehensive special education. Under this program handicapped children may begin receiving educational services at age 3, or earlier if they are deaf, blind or both. Actually, age 3 is not early enough for most other handicapping conditions either. Mental retardation, emotional disturbance, autism, physical handicaps, etc. can be greatly alleviated if educational services and parent counseling are started as soon as the handicap is identified after birth.

Prevention was also the basis of a proposed comprehensive program for children and youth prepared by an interagency task force in 1974. Certain points of the program are still relevant today, four years later. They include:

—opportunities for learning about the responsibilities of parenthood for parents and prospective parents
—comprehensive medical screening for all children of medically indigent families
—career education for youth
—an integrated community program for preventing school dropouts

—increased emphasis on the nutritional needs of all pregnant women and children

—expanded programs for special populations, including juvenile offenders, handicapped children, children of limited English-speaking ability, drug abusers, school age parents,

—a comprehensive network of family planning services.

A program of prevention for children and youth will not solve all the social problems of Texas. It would, however, help overcome some of the problems children and families now face. For the mother in the Langston Hughes poem, and the thousands of Texas parents like her who are "still goin', Honey, still climbin'," it would provide an even greater sense of hope for the future—for a brighter side of childhood.

***"It's had tacks in it,***
***And splinters."***

The environment sets the stage for how children and families live. Environmental influences by and large are beyond the control of individual families. This section presents some important environmental elements of everyday life in Texas—cost of living, housing, crime, television.

Overall, Texas is a great place to rear a family. Heralded as the "prosperous gateway to the Sunbelt," Texas is growing twice as fast as the U.S. as a whole in population.

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Ironically, more than 15 percent of all Texans are poor; only nine states have higher percentages of people in poverty. Texas enjoys other indications of economic vitality—the low unemployment rate (5.3 percent compared to the nation's 7 percent for 1977) and the rising median income for Texas families ($8,490 in 1969 and $12,672 in 1976). But Texas has some of the poorest people in the nation—in the Rio Grande Valley—and pockets of poverty in rural East Texas counties and in big city ghettoes.

The frustrating thing about poverty is that it perpetuates itself. Babies born in poverty are more likely to be born with defects, because their mothers are often malnourished and do not receive prenatal care. As they grow up, poor children are often surrounded by inadequate sanitation and substandard housing and thus are more susceptible to health hazards and disease. If the environment offers little opportunity for learning and interaction with adults, poor children may not progress in school and eventually drop out, with few job skills and little prospects for raising themselves out of the situation into which they were born.

Middle class families in Texas are by no means free from worry. Children cost more to feed and clothe than ever before, and a raise in pay is often eaten up by higher insurance rates and higher house payments. Some neighborhoods that used to be safe for children to play in have succumbed to new superhighways or apartment projects. Even suburbs have come under attack recently—

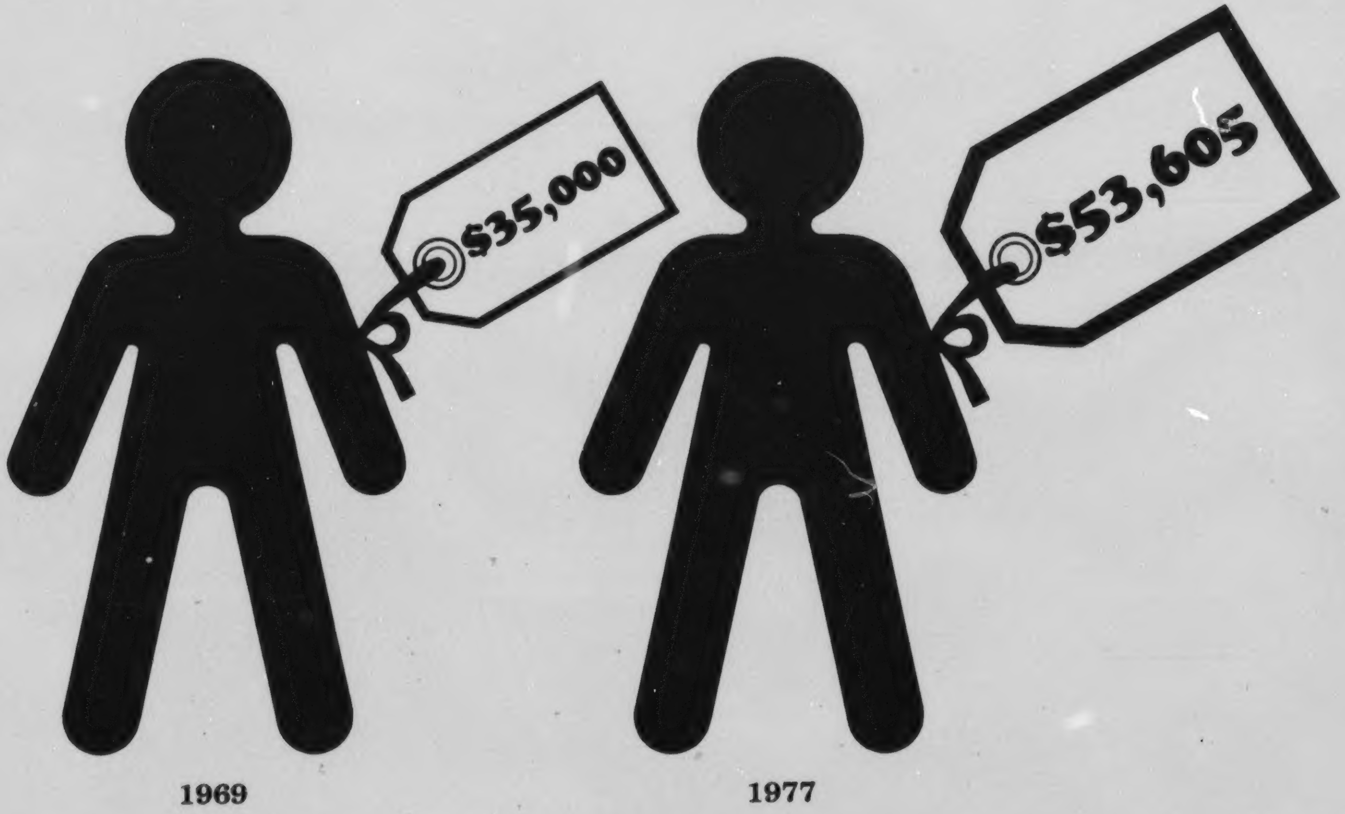
criticized as a sterile environment for rearing children because suburbs isolate children from the world of work and from people of different income and age levels. Affluent families are often accused of pampering their children, spoiling them with material goods and ignoring basic moral principles and values.

Some environmental elements, such as television, are pervasive—they affect all families regardless of income or educational level. Some elements are only beginning to be suspected and studied more carefully, such as DDT in foods, radiation from nuclear power plants, chemicals in aerosol sprays. Drinking water in Texas is generally safe, although a few small city water systems exceed the limit for nitrates (which can be fatal to infants under six months old). Pollutants from automobiles and industry are becoming more of a problem in Texas' larger cities. However, natural pollutants—such as pollen, spores and molds—probably affect more children than man-made pollutants. Allergists estimate that 7-15 percent of all Texas children suffer from allergies, causing colds, bronchitis, ear infections and other illnesses, as well as missed days at work for their parents.

With much of the environment beyond the control of an individual family, the image of the self-contained, self-sufficient Texas family is quickly fading into myth. Families have relied in the past, and still do, on the larger power of the community and the supportive services it offers—schools, churches, businesses, citizens' groups, local government. Vice President Walter Mondale has said: "We need to begin shaping a society that doesn't just tolerate family life, or pretend to be neutral toward it. . . . I am confident that we can help shape an environment that strengthens and supports families."

# The cost of rearing a child has jumped 50 percent since 1969

**—$53,605 for one child to age 18 in the United States.**



**COMMENT:** Childrearing is becoming increasingly expensive. The cost above is estimated for an urban family earning $16,500 to $20,000 a year after taxes. Such a family would spend another $8,416 to send a child through four years of college. Child rearing costs vary by standard of living, of course, but even so costs are considerable. A low-income family earning $10,500 to $13,500 a year would spend $35,261 to rear a child to age 18 at 1977 prices. Parents universally underestimate the actual economic costs of rearing a child. Childbirth expenses alone jumped 40 percent in five years—to $2,194 in 1976.

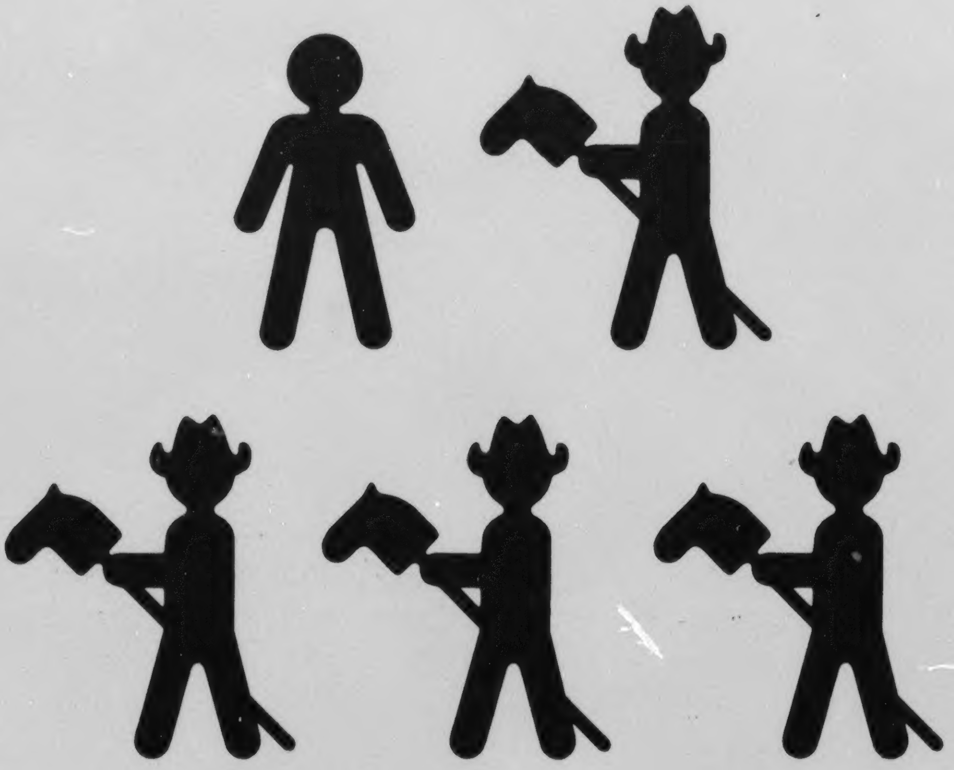
**SOURCE:** Thomas Espenshade, *The Value and Cost of Children*, April 1977.

ENVIRONMENT

2

## 1 of every 5 children in Texas lives in poverty

**—813,190 children under 18.**

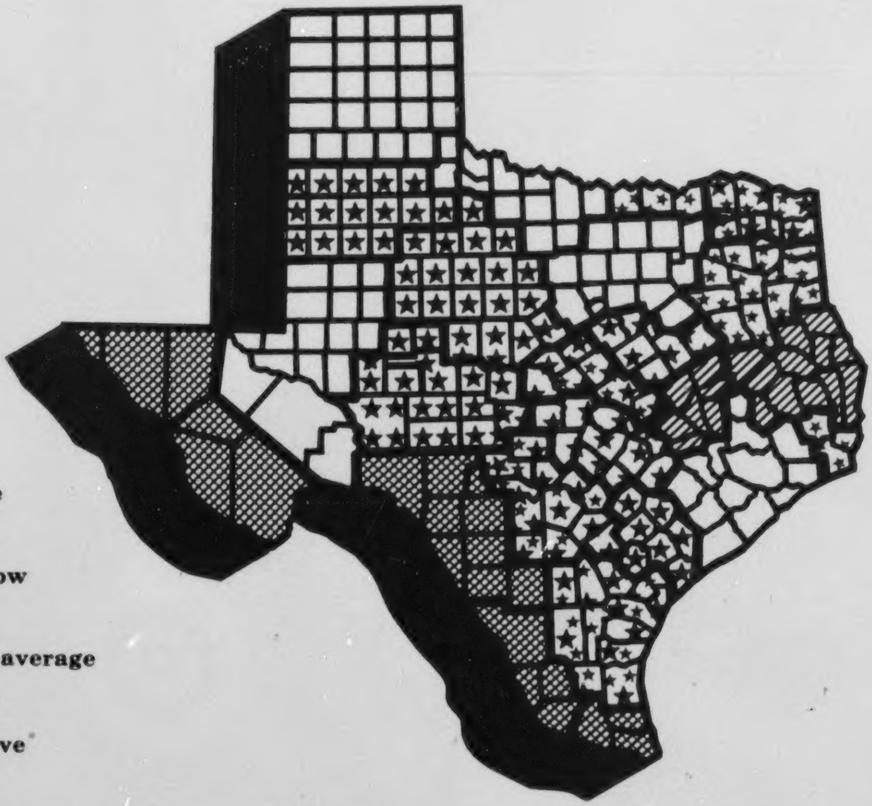


**COMMENT:** The war on poverty has apparently stopped in its tracks—21 percent of all children in Texas were poor in 1970 compared to 20.6 percent in 1975. The Census Bureau's 1975 definition of poverty was $5,050 or less for a family of four, a level most Texans would consider bare subsistence. Children in such a family, with only $420 to spend a month, probably would not get enough to eat, never have a bed of their own, endure biting cold in winter and sweltering heat in summer, get one pair of shoes a year and rarely see a doctor. For infants and small children at a critical time in their development, the deprived conditions could be disastrous.

**SOURCE:** "Preliminary Results from the 1976 Survey of Income and Education," and 1970 Census reports, U.S. Bureau of Census.

# 406,076 children live in the four worst economically depressed regions of Texas

**—unemployment rates are double the state average, and median incomes 20-40 percent lower.**



**UNEMPLOYMENT**
▧ **Double state average**
★ **Above state average**
☐ **State average or below**

**PER CAPITA INCOME**
▨ **18 - 40% below state average**
★ **Below state average**
☐ **State average or above**

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**COMMENT:** About 12 percent of all children in Texas live in the Rio Grande border regions, which lag far behind the vitality of the rest of the state and, indeed, are among the poorest regions of the nation. Unemployment is more than twice the 1977 state average of 5.3 percent and median per capita incomes range one or two thousand dollars below the 1975 state average of $5,635. Compounding these bleak economic indicators is a rapidly growing population—15-27 percent increase since 1970. Employment and income are basic to a family's ability to provide proper food, housing and medical care for its children. In fact, lack of a job and inadequate pay have been linked to alcoholism, drug abuse and child beating.

**SOURCE:** *Texas Fact Book 1978*, Bureau of Business Research, The University of Texas at Austin; *Newsweek*, May 15, 1978; and Texas Department of Human Resources 1978 estimates for Title XX Services.

ENVIRONMENT

# 4

# Children in rural areas are more likely to be poor than those in urban areas

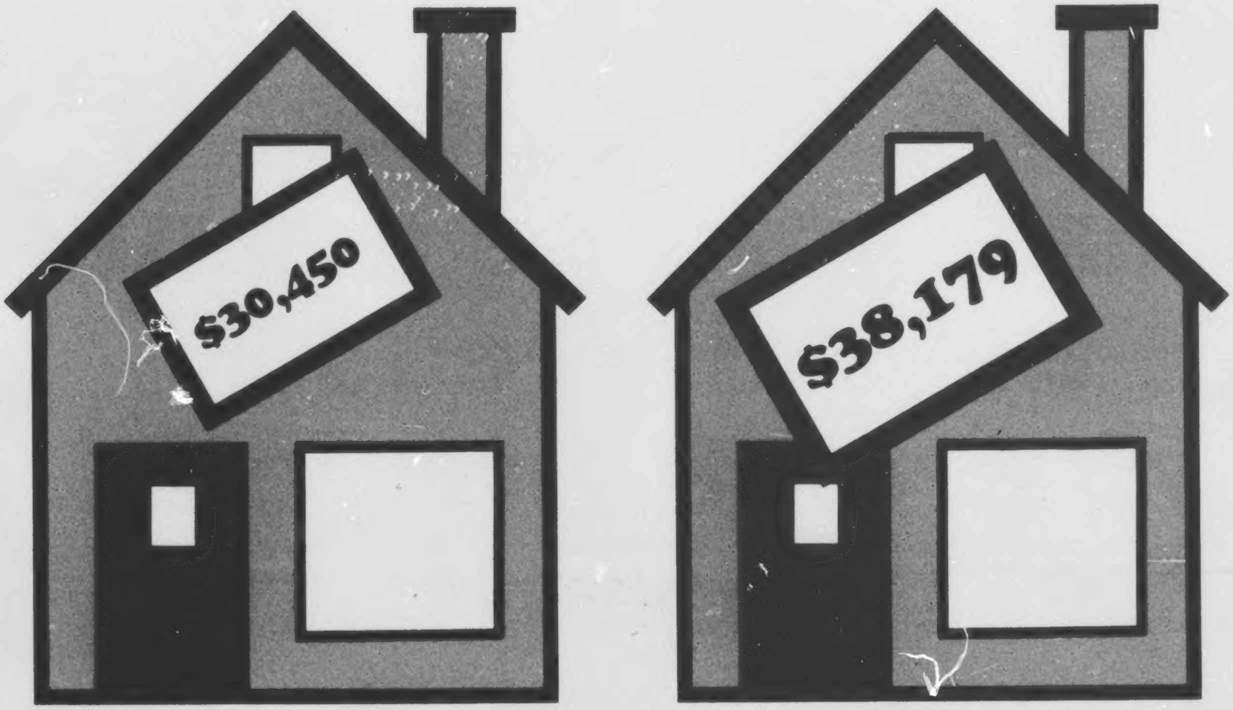
## —and less likely to receive public services.

**COMMENT:** An estimated 27 percent of Texas families live in rural areas, and, given the current trend to move back to rural areas, this proportion may increase. ("Rural" is defined as population of 2,500 or less.) Even though population growth is usually accompanied by a raised standard of living, this is not happening as fast in rural areas as in the rest of the state. In a 1971 survey, 1 in 4 rural housing units in Texas was marginal or substandard. Children in rural areas may ride a school bus for more than one hour. Because local governments in rural areas tend to be less well financed than those in urban areas, they are less able to provide the same quality or quantity of services. To gain access to services, residents may have to travel 30-50 miles one way.

**SOURCE:** Texas Department of Community Affairs, County and Rural Services Division; Survey of Income and Education 1976, U.S. Bureau of Census; *Texans and Human Services*, Texas Department of Public Welfare, May 1977.

# The cost of buying a home in a major Texas city rose 25 percent in two years.

**—And 1 in 11 Texas households are living in substandard housing.**



**1974 AVERAGE SALES PRICE OF ALL HOMES 1976**

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**COMMENT:** Owning one's own home may fast be going beyond the reach of young families with children. Escalating prices are by no means the result of bigger homes with extra features, because cost per square foot is also rising steadily—19 percent between 1971 and 1973. Rental rates have also gone up. Even so, many Texas homes are substandard—they lack plumbing or are structurally dilapidated. In the 1970 Census, 316,552 of Texas' 3.4 million households were living in substandard housing. Of those substandard, 28 percent were also crowded (more than 1.01 persons per room minus bathroom, basement, utility rooms, etc.).

**SOURCE:** Texas Department of Community Affairs, Housing Division, from Census reports; Texas A&M University, Texas Real Estate Research Center, 1977.

# 6

# 90 percent of Texas crime occurs in urban areas, where 78 percent of all Texans live.

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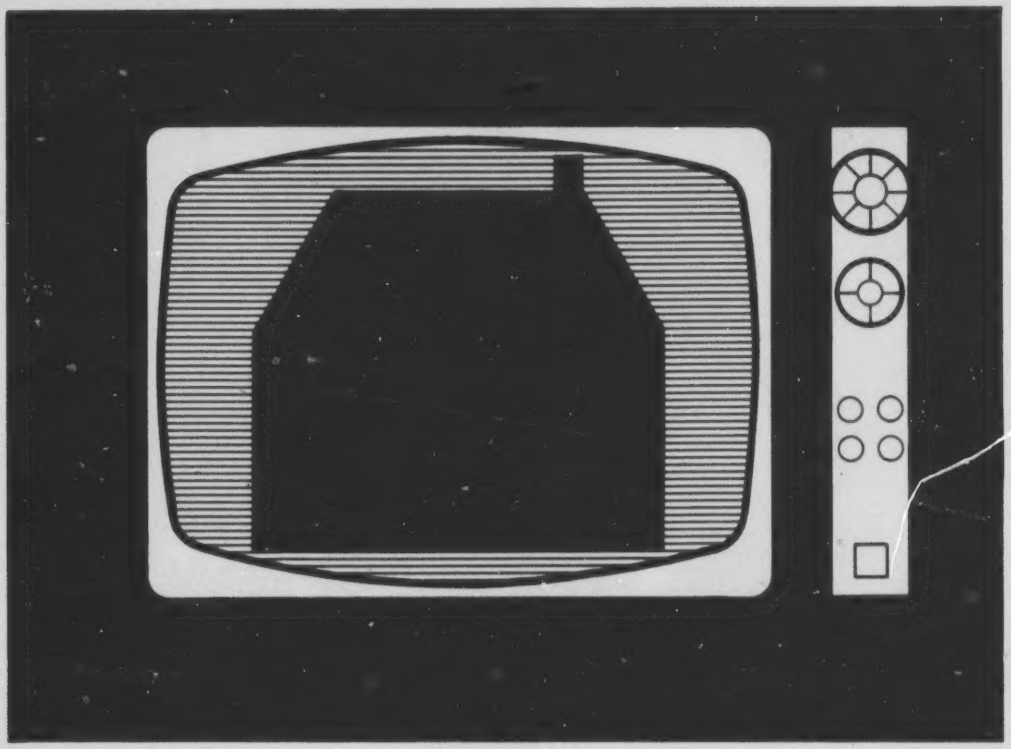
**COMMENT:** Many people, especially in urban areas, are afraid to walk in their neighborhoods at night. In a 1976 Houston-Galveston area study, more than 6 percent of those surveyed had been robbed or assaulted during a six-month period and 15 percent had property vandalized. One increase in crime is daytime home burglary, which correlates with the fact that more women are in the labor force, leaving no one at home during the day. A national survey of children 7-11 years old found that two-thirds of the youngsters feel afraid "that somebody bad might get into your house." Not all of these can be dismissed as normal childhood fears of bogeymen. Some are undoubtedly based on real experience; others on television.

**SOURCE:** Criminal Justice Plan for Texas, 1978; Summary of Preliminary Results, National Survey of Children, 1976; Survey of Houston-Galveston Planning Region, University of Houston, 1976.

## 7

# Children under 5 watch an average of 23½ hours of television a week.

**By age 18, a child will have spent 15,000 hours watching TV compared to 11,000 hours in school.**



**COMMENT:** Preschool children learn social roles from television. One study found that the single greatest impact on a child's social development was his mother, the second was TV and the third was his father. Although "Sesame Street" and similar shows have positive effects, too much TV for some children can lead to behavior problems and a distorted view of real life. Dozens of murders and beatings are portrayed on television each week—some 7.5 violent episodes per hour during prime time for children. As a result, children may learn that violence is an acceptable way to resolve conflict and that problems can be solved in 30 or 60 minutes.

**SOURCE:** *Actfacts*, Action for Children's Television; *Newsweek*, Feb. 21, 1977; Dr. Charles R. Corder-Bolz, Southwest Educational Laboratory, Austin, and the Texas PTA, Austin.

***“And boards torn up,***
***And places with no carpets on the floor”***

Just as the environment forms the larger world of the child, the family forms the intimate world. From the family come the first opportunities for physical well-being, learning, and loving. A family is home—where you first belong, learn who you are. The family is uniquely equipped for helping make human beings human.

What is happening to the family? Some say it is falling apart, as evidenced by a declining birth rate, increasing divorces, and the demise of the extended family. Others say no. Dallas psychiatrist Jerry Lewis thinks it unlikely that a system which has survived for millions of years will suddenly disappear. What is more likely—and as the facts in this section show—the family is not dying; it is changing.

Two centuries ago, families were self-sufficient agricultural units. They were also the prime source of education for their children. Today, according to the Carnegie Council on Children, parents are more like executives in a corporation: they are involved in "consultations with teachers, finding good health care, trying to monitor television watching, and so on." In short, they are "responsible for the many people and processes that must work together to produce the final product."

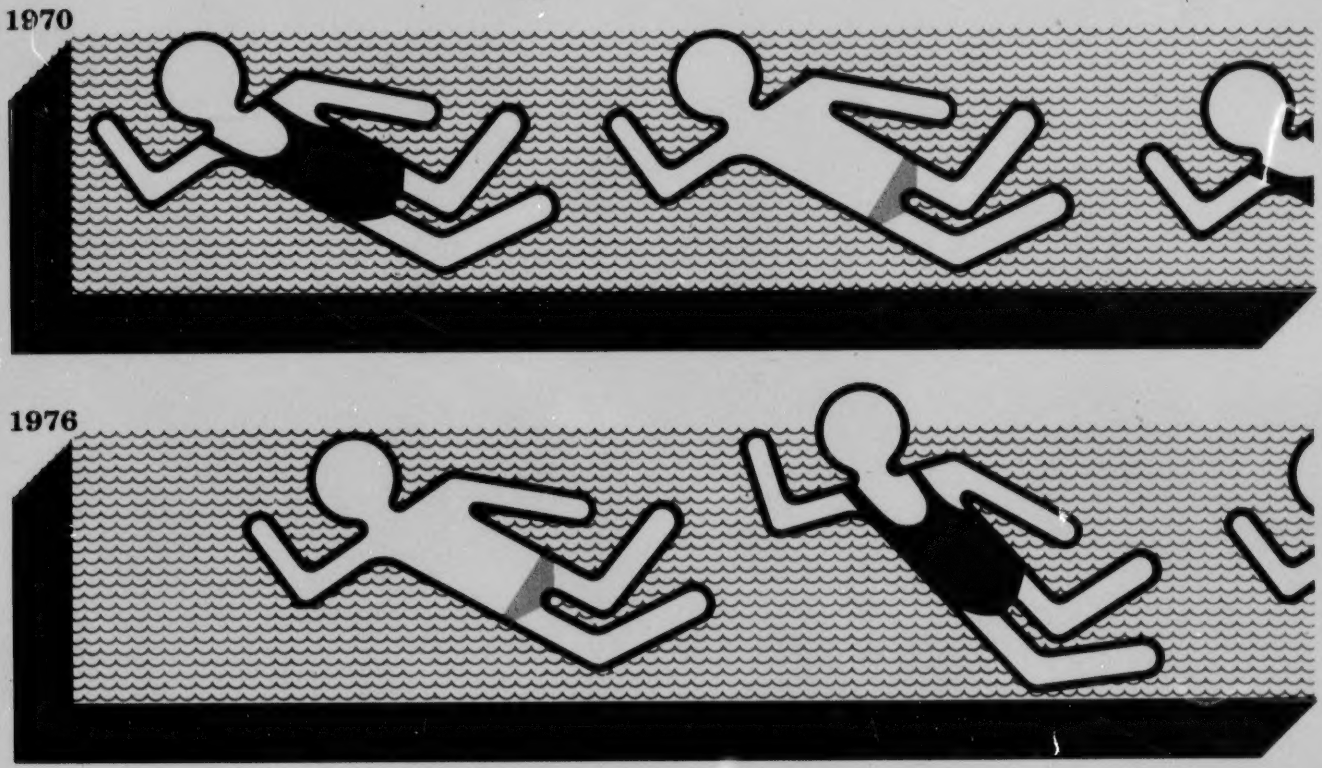
Just within the last few decades, three principal changes have affected family structure: (1) smaller family size, (2) more mothers working outside the home, and (3) increasing numbers of female-headed households. What do these changes mean? The decision not to have more children is based on cost as well as other factors. Fewer children may be a positive sign, because it may enable parents to better provide for their children. The increase in mothers entering the labor force stems largely from the fact that two incomes are needed today to support a family. The great concern here is that their children receive quality care. Studies have shown that when children receive quality care, the effects of day care are no different than care in the home. Some mothers must work outside the home because they are heads of a household—largely as a result of divorce. Divorce can bring grave consequences, not only because of added economic and psychological burdens for parents but also because of the emotional effect on children. It has been estimated that 2 of 5 children born in the 1970s will live for some time with a single parent. Authorities are wondering whether special services should be provided for these children.

Grandmothers and aunts—the extended family—have traditionally been thought of as a source of help in child rearing. Today they are the preferred source of child care for many working and single mothers in Texas, and in that sense, the extended family is very much alive. Some families cannot rely on the extended family for assistance because they live too far away; often these are more highly educated and mobile than other families. Mobility, of course, brings its own set of problems and needs—the sense of uprooting, isolation, insecurity. Young families do move frequently, from apartment to house to make room for a new baby, and from small house to larger house as the family grows. Families also move from city to city to follow job promotions. This trend is decreasing, according to a national moving company, because more families may be putting personal needs before business opportunities.

Of the changes in family life, the Carnegie Council says: "There is nothing to be gained by blaming ourselves and other individuals for family changes. . . . Parents still have the primary responsibility for raising children, but they must have enough power so that they can be effective advocates with, and coordinators of, the other forces that are bringing up their children."

# Texas families are getting smaller.

**The average number of children per family in Texas has dropped from 2.38 in 1970 to 2.15 in 1976.**



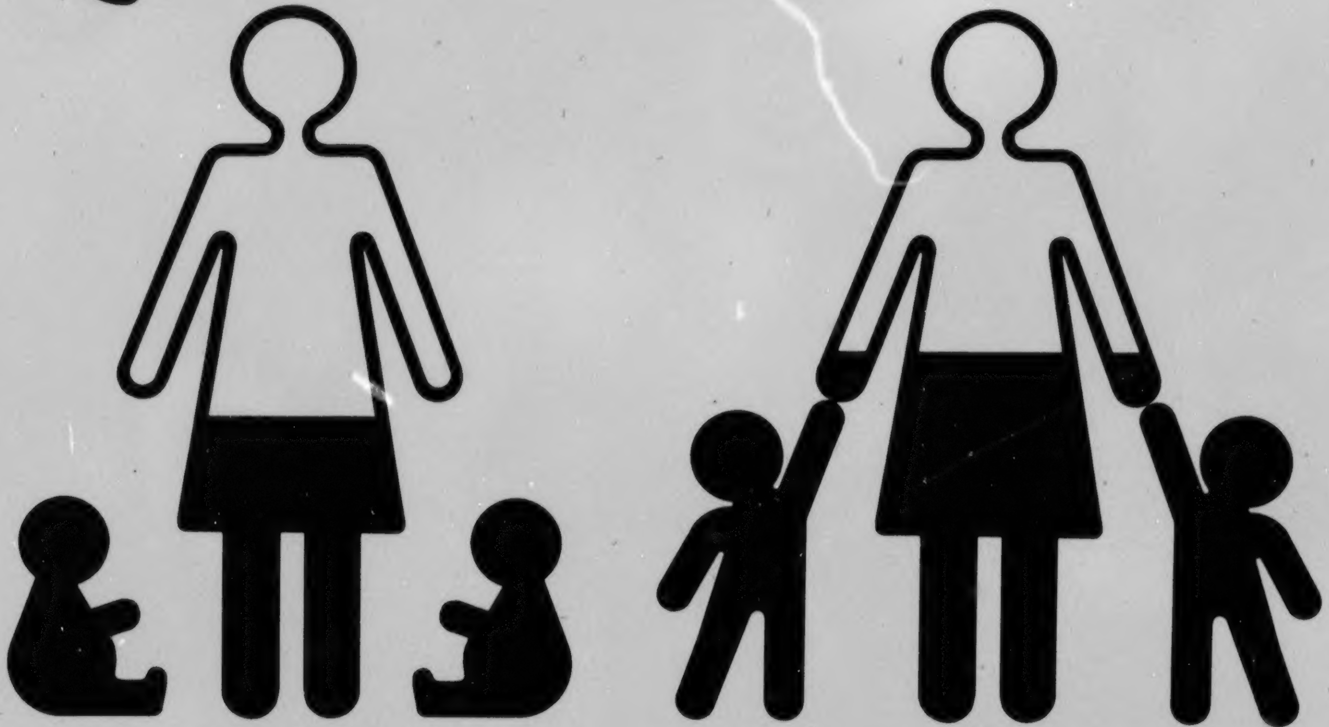
**COMMENT:** Studies indicate that small family size may be more beneficial than detrimental for children, because smaller families are usually better off financially and children receive more parental attention. Fewer children may have long range effects on Texas families, such as diverting women earlier from child rearing and enabling them to return to the labor force. One other effect is that today's children are growing up without opportunities to care for younger siblings, and therefore will have limited preparation for parenthood.

**SOURCE:** 1970 U.S. Census and 1976 Survey of Income and Education, U.S. Bureau of Census; Mary Jo Bane, *Here to Stay*, 1976.

# 9

## 40 percent of all Texas mothers with children under 6 are in the labor force.

### —and 54 percent of all mothers with school-age children.



**40% OF MOTHERS WITH CHILDREN UNDER SIX**

**54% OF MOTHERS WITH SCHOOL-AGE CHILDREN**

**COMMENT:** More and more families are finding that two incomes are needed to keep pace with inflation and provide for their children's needs. Most striking evidence is the proportion of working mothers with preschool children. As a consequence, more families must arrange for child care—full daytime care for preschool children and before- and after-school care and summer care for older children. Another consequence is the physical and emotional burden of combining job with household duties. Women new to the labor force may find their loyalties divided between family and career, thus adding to the strains on family life.

**SOURCE:** *1975 Handbook of Women Workers*, U.S. Department of Labor, Texas Household Survey of Families with Children under Six, 1973.

# 10

# Overwhelmingly, the reason mothers work outside the home is economic necessity.

---

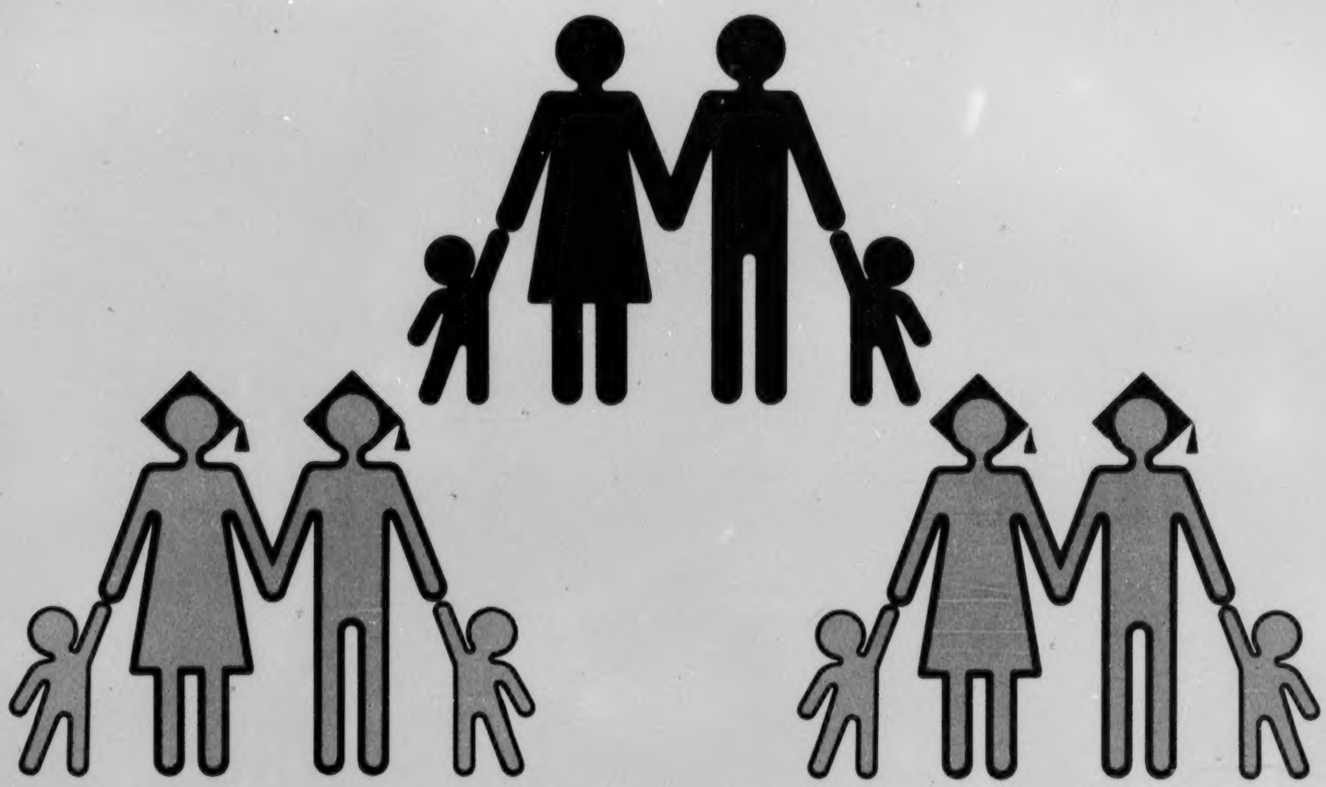
**COMMENT:** Although many women find employment a source of satisfaction and personal fulfillment, most mothers work because they have to. A 1973 Texas survey of families with children under six found that 84 percent of employed mothers worked out of economic necessity. Three out of four of the mothers surveyed were working at least 40 hours a week. Further evidence comes from the fact that 1 in 5 working mothers has a husband who earns less than $7,000 a year, and too, that many working mothers are divorced or separated, and thus the sole support of the family.

**SOURCE:** Texas Household Survey of Families with Children under Six, 1973; *America's Children 1976*, National Council of Organizations for Children and Youth; *Working Mothers and Their Children*, U.S. Department of Labor, 1977.

# 11

## One-third of all Texas parents with children under six have not finished high school.

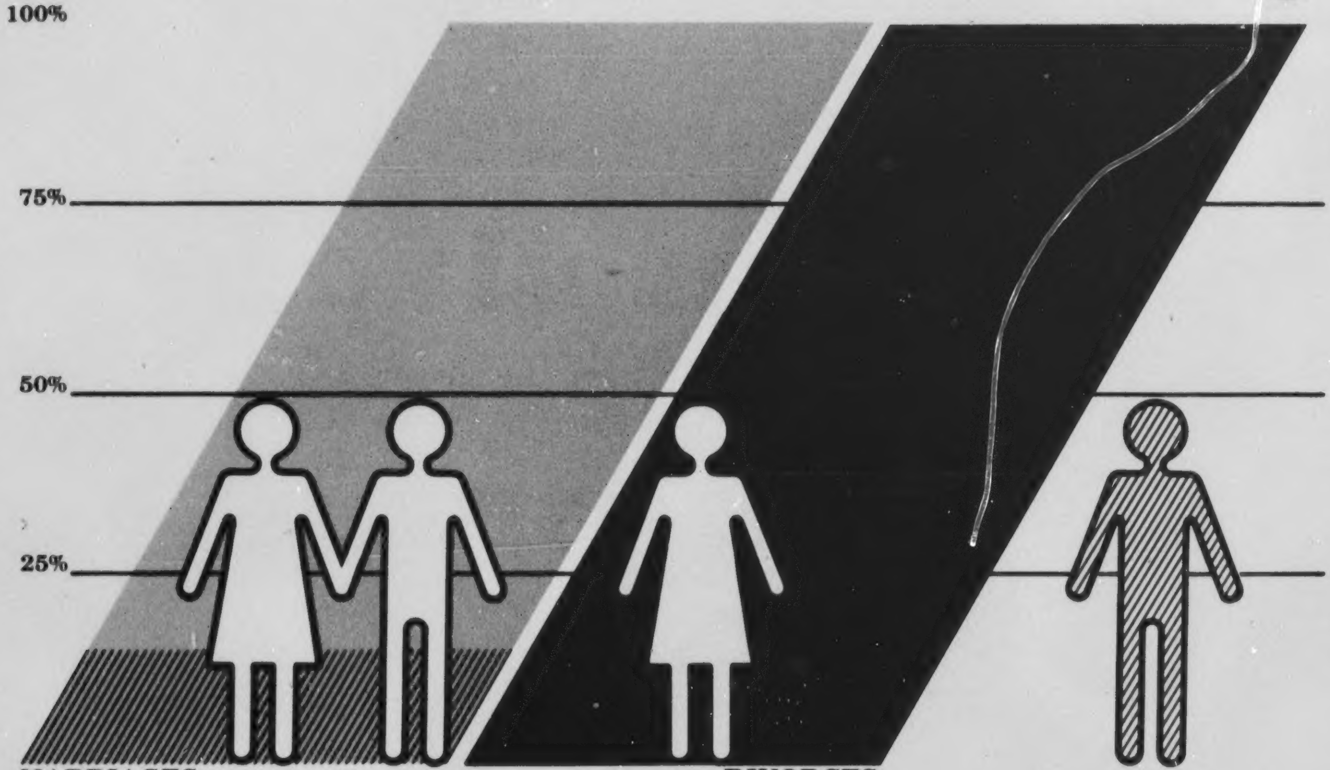
**Among Texas mothers of preschool children, the proportion is 40 percent.**



**COMMENT:** Despite the steady rise in educational attainment over the past 35 years, a high proportion of young parents in Texas do not possess even a high school diploma, a basic necessity for obtaining a higher paying job. Low educational attainment means that a person will have to look harder for a job and, once employed, work longer and harder to earn an adequate living. The outlook for their families becomes more limited. One can go back and finish school, but once a person has children the possibility is more remote, because all one's time must be spent in working to support the family.

**SOURCE:** Texas Household Survey of Families with Children under Six, 1973.

## While Texas marriages increased 14 percent since 1970, divorces increased 60 percent.



**MARRIAGES**
**139,578 in 1970**
**159,576 in 1977**

**DIVORCES**
**51,530 in 1970**
**82,265 in 1977**

**COMMENT:** Experts disagree on whether increasing divorces are a sign of weakening family structure. Regardless of how bad the marriage was, divorce can be upsetting to children, ranking next to death as a traumatic experience. Children are likely to experience anxiety, fear and grief and manifest their feelings in fantasy, aggression, compulsive eating, troubled sleep, and behavior problems at school. Aside from emotional effects, divorce may force the mother into the job market and the whole family into a more impoverished standard of living.

**SOURCE:** Texas Department of Health, Bureau of Vital Statistics; *Redbook*, Sept. 1976; Dr. William Campbell, Austin, June 26, 1978.

# 13

# Texas divorces in 1977 affected 81,638 offspring

## —many of them under age 18.

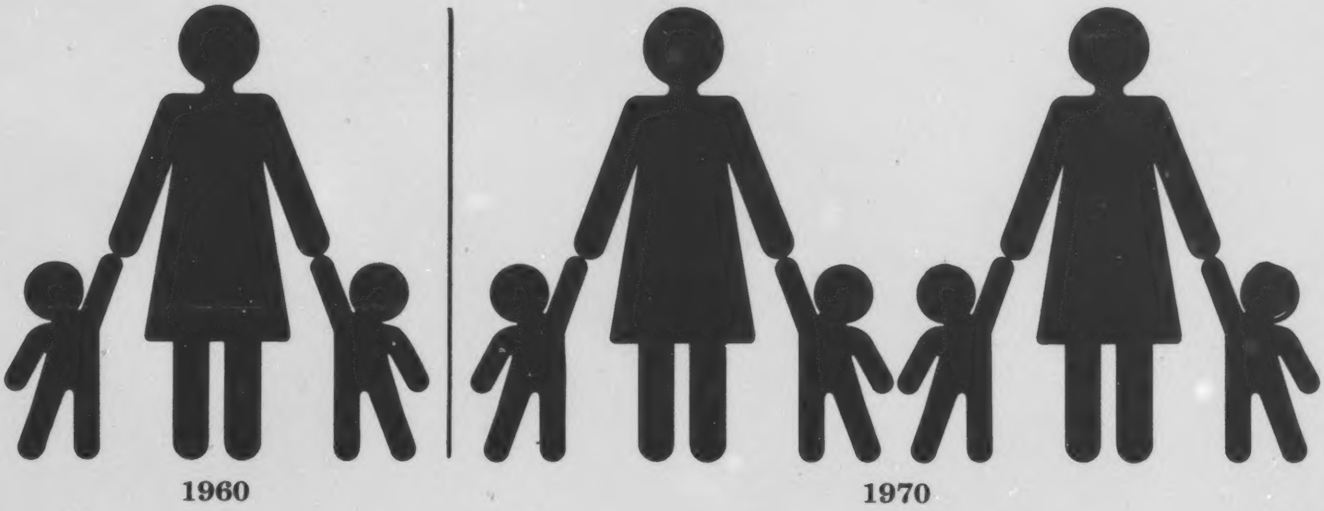
**COMMENT:** About half of all divorces in Texas involve children—both grown children as well as minor children still living at home. How many small children is difficult to determine, but the number must be significant because 27 percent of divorces ended marriages of 5-9 years duration. Nine times out of ten, the mother receives custody, even though the revised Texas Family Code instructs judges to award custody in the best interest of the children. Two-thirds of the children in one national survey whose parents were separated or divorced didn't see their fathers regularly. When fathers lose contact, they are less likely to continue financial support.

**SOURCE:** Texas Department of Health, Bureau of Vital Statistics; Summary of Preliminary Results, National Survey of Children 1976; Texas Fathers for Equal Rights.

# Texas households headed by mothers with children under 18 nearly doubled between 1960 and 1970

**—and probably have increased by a third since 1970.**

# 14



**COMMENT:** Much of the increase in mother-headed households is undoubtedly due to the rising number of divorces. Half of all women heading households in the U.S. in 1976 were divorced or separated. Even though many divorced people remarry, the remarriage rate for divorced men was three times that of divorced women in 1974 nationwide. Social scientists surmise that a woman with children is not as attractive a marriage partner as a woman with no children. The rise in mother-headed households may also be due to the tendency of single women to form their own households with children, rather than moving in with other relatives, and the rising number of unmarried mothers.

**SOURCE:** U.S. Census Reports, 1960 and 1970, and Survey of Income and Education, 1976, U.S. Bureau of Census; *Toward a National Policy for Children and Families*, National Research Council, 1976.

# 15

# Among female-headed households with children under 18 in Texas, 58.6 percent are living in poverty.

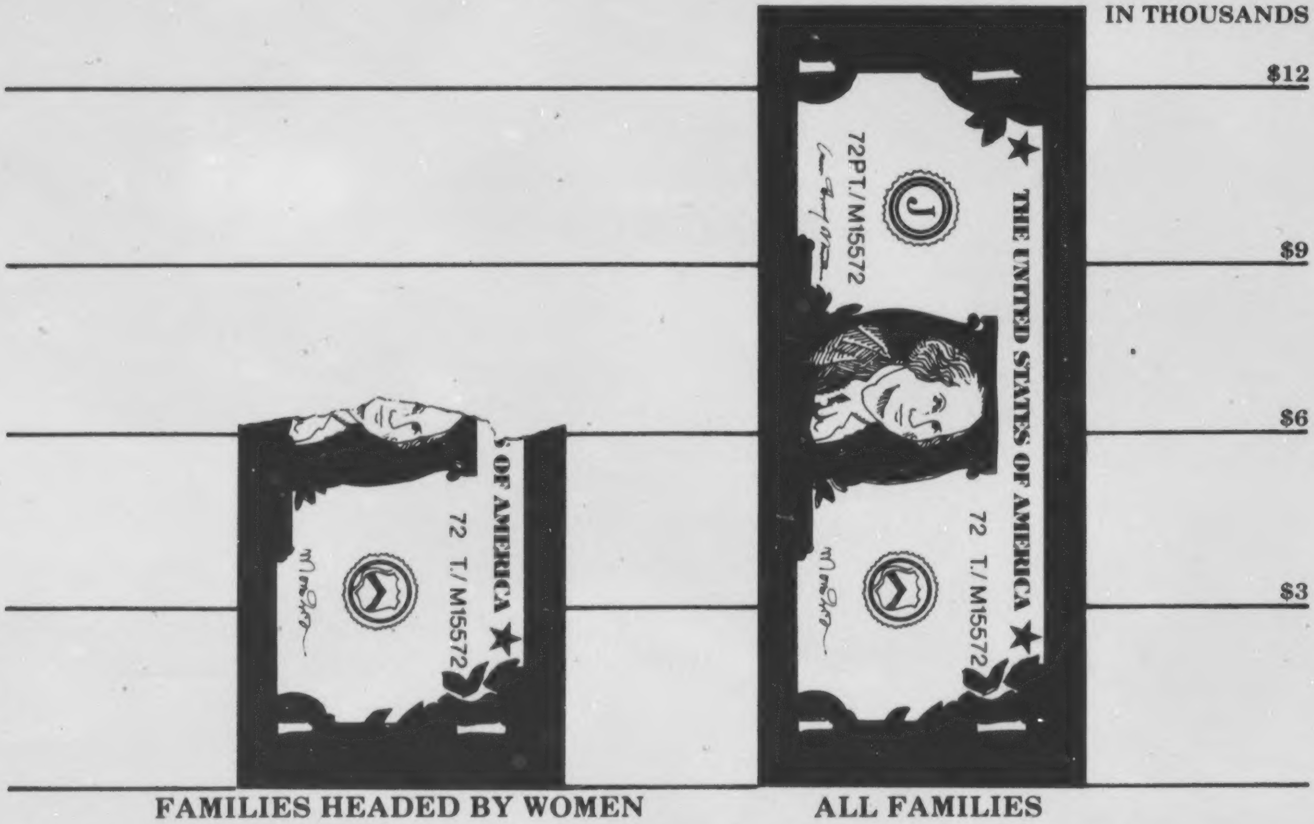
**COMMENT:** Families headed by women are likely to be poor. (The 1975 Census definition of "poverty" is $5,050 or less a year for a family of four.) As a result, their children are more at risk for receiving adequate health care, nutrition and other services. Minority children in families headed by women are even more likely to be poor than white children. Because of the likelihood of poverty, many divorced, separated or widowed women are in the labor force. However, if these women have little schooling, employment offers limited opportunities for improving their economic situation.

**SOURCE:** Survey of Income and Education, 1976, U.S. Bureau of Census; *America's Children 1976*, National Council of Organizations for Children and Youth.

# 16

## The median annual income of female-headed households in Texas is about half that of all families

**—$6,136 compared to $12,672 for all families in 1975.**



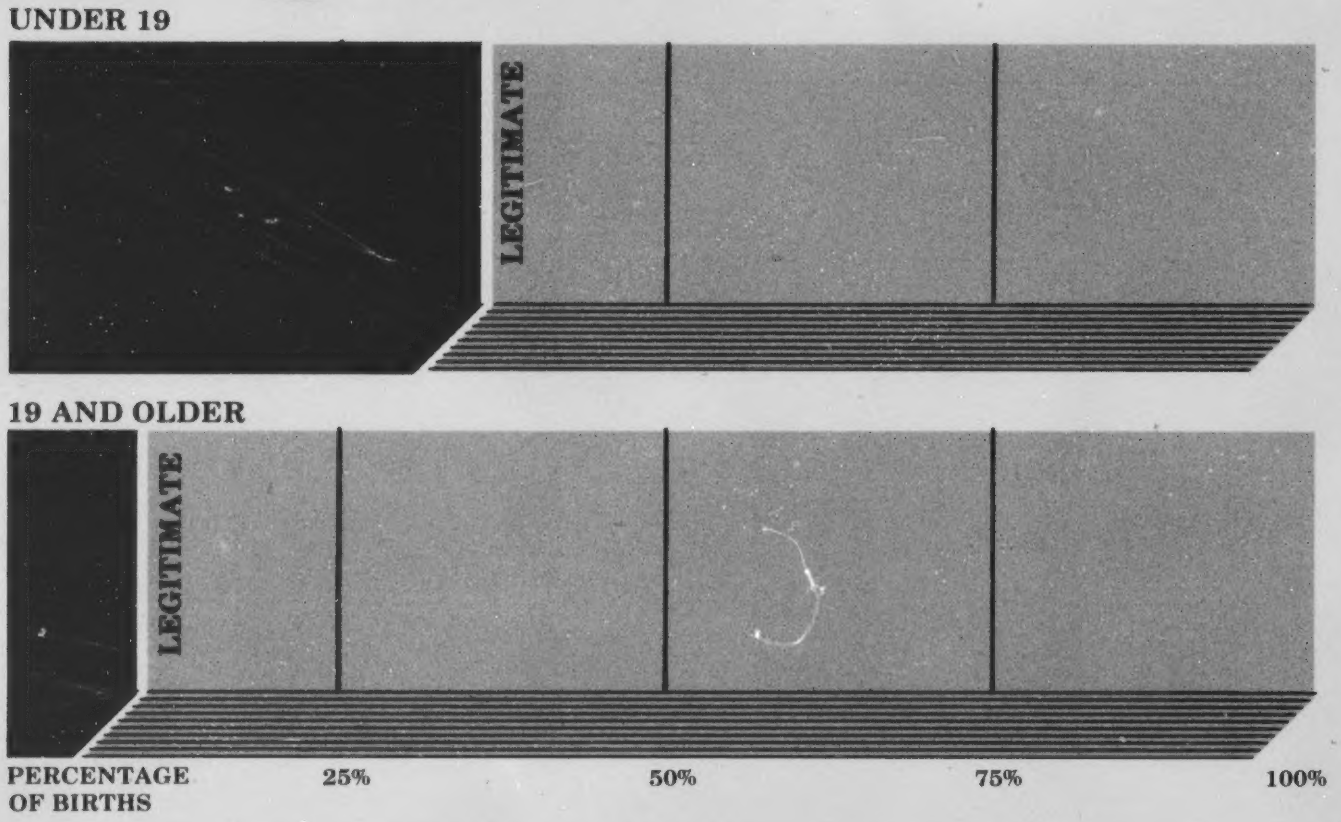
**COMMENT:** For every dollar earned by a man who heads a household in Texas, a woman head earns 50 cents. Despite the progress toward equality for women, the gap in earnings between men and women is substantial and, in fact, increasing. One reason is that women are concentrated in lower-paying jobs and fields—they work as domestics, health service workers, teachers, laundry operators, bookkeepers, food service workers, and retail sales clerks. In addition, unemployment rates for women are higher than for men, and are particularly high for minority women. Against such odds, women household heads carry a great economic burden—providing all needed services to their children on a pittance of what most families have.

**SOURCE:** Survey of Income and Education, 1976, U.S. Bureau of Census; "Texas Women in the Labor Force," *Texas Business Review*, May 1978.

# 17

## In 1975 out-of-wedlock births accounted for 36 percent of births to teenagers under 19 in Texas

### —but only 8 percent of births to older mothers.



**COMMENT:** Mothers who are both teenagers and unmarried are at greater risk for health and family problems than older, married mothers. "The girl who has an illegitimate child at age 16 suddenly has 90 percent of her life's script written for her. She will probably drop out of school; even if someone else in her family helps to take care of the baby, she will probably not be able to find a steady job that pays enough to provide for herself and her child; she may feel impelled to marry someone she might not otherwise have chosen. Her life choices are few and most of them are bad." (Campbell)

**SOURCE:** From 1975 data, Division of Maternal and Child Health, Texas Department of Health; Arthur A. Campbell, "The Role of Family Planning in the Reduction of Poverty," *Journal of Marriage and the Family*, 1968.

## 18

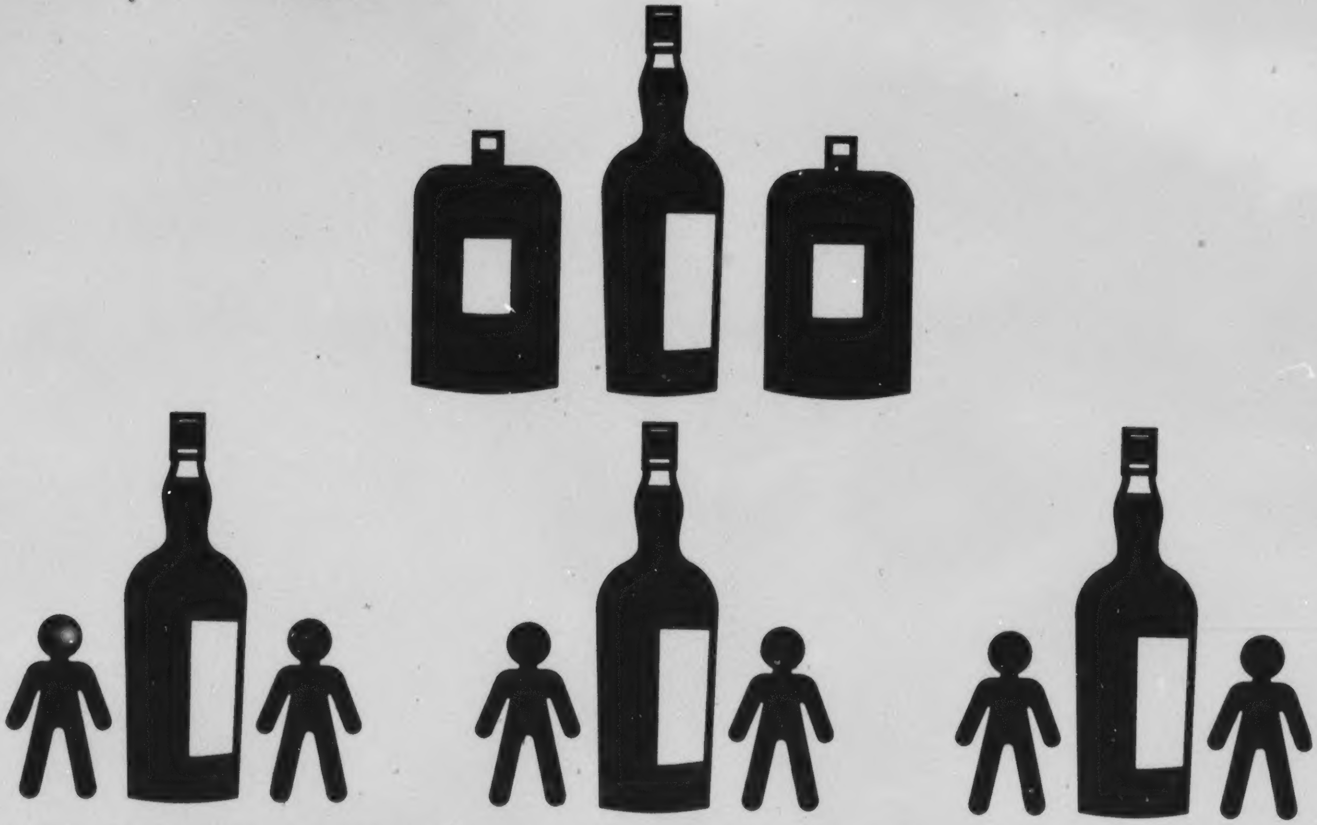
# 1 of 4 Texans marrying each year is a teenager.

**COMMENT:** Although the 20-24 age group has the largest number of marriages in Texas each year, they comprise a smaller proportion of total marriages in 1977 than they did 10 years earlier. However, the teenage group, 19 and under, continues to comprise the same 23 percent of all marriages that they did in 1967. Teenage marriages are 2-3 times more likely to break up than those who marry in their 20s. One study showed that of those who became pregnant before the wedding, 3 of 5 were separated or divorced within six years of marriage. Studies have also shown that teenage parents are more likely to be emotionally immature and have unrealistic expectations of how children develop.

**SOURCE:** Texas Department of Health, Bureau of Vital Statistics; *11 Million Teenagers*, Planned Parenthood Federation of America, 1976.

# 19

# 1 of 4 children of alcoholic parents will likely become alcoholics themselves.



**COMMENT:** Estimates are that about 660,000 Texans are alcoholics. Alcoholism is a family illness. At least four other persons suffer along with the alcohol abuser, including children. Alcoholism costs millions of dollars in lost productivity and property damage, has been a significant factor in death and injury in motor vehicle accidents, and has led to marital problems and poor child rearing practices, including child neglect and abuse. Excessive alcohol use is a major factor in more than 50 percent of divorce cases. Also, more than half of all juvenile delinquency cases are associated with having a family member who is an alcoholic.

**SOURCE:** "Alcoholism Facts," Texas Commission on Alcoholism, 1977.

## 20

# Texas private and public child-placing agencies placed 2,331 children in adoption in 1977.

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**COMMENT:** Private agencies placed 1,398 children, 88 percent of whom were Anglo infants under one year old. The Texas Department of Human Resources placed 933 children. The vast majority of these children were minority children ages 1-12; many were handicapped. Increasingly, the state is looking for adoptive homes for children who are older, handicapped, members of a minority, racially mixed, or sibling groups who need to be adopted together. Not counted above are some 6,700 other Texas children who were adopted by stepparents, grandparents, etc. or placed through other means.

**SOURCE:** Texas Department of Human Resources, Child Protective Services.

ct 46

*"Bare.*
*But all the time*
*I'se been climbin' on"*

Because children are reared in families, the family is the source of much basic health care for children—nutrition, safety, emotional and mental health, and general physical well-being. But parents rely heavily on health care outside the family—doctors, hospitals, and community safety and sanitation programs. Good health care is within the reach of Texas families who earn enough to pay for it, who live where there are adequate personnel and facilities, and who know what health care is.

Good health care for children begins with the health of mothers because that is where children are conceived and formed. The mother's general physical health, her access to proper prenatal care, her diet and her emotional and mental health determine whether she will carry a baby to full term, have a safe delivery, and bear a child free of handicaps. Infants born in Texas today stand a greater chance of surviving than ever before. The infant death rate is down from 20.2 deaths per 1,000 births in 1972 to 14.7 in 1977, roughly the same as that of the United States as a whole. But the nation's infant death rate can hardly be considered the ideal, because it is worse than 15 other developed nations of the world, including Japan and Great Britain.

Some Texas children are more "at risk" for disease and disorders than other children. Risk indicators, which have been developed through research by social scientists, include the mother's age, her education, marital status, and the child's birth weight. Generally, the younger the mother (19 and under), the more at risk the child for being born with disorders. The less education the mother has and the lack of a husband, the less likely she can pay for proper prenatal and medical care. The lower the baby's weight at birth (under 5 and one-half pounds), the more likely the child will not develop properly.

Preventive health care is necessary throughout the early childhood years—immunization, screening for health and developmental problems, regular medical care, and proper nutrition. Immunizations have dramatically reduced childhood diseases—so much so that many of today's parents think that polio, diphtheria, and other diseases are a thing of the past. Regular visits to a doctor or clinic, even when a child is well, help spot minor problems—allergies, infections, growth problems—that could become chronic or leave the child impaired. But medical care is becoming increasingly expensive. In 1977, the average family in Dallas earning $15,000 a year spent $1,114 on medical care, more than they spent on clothing. Regular medical care also enables children to be screened for abnormalities. If recognized early, disorders can be treated so that development proceeds normally. How vulnerable low-income children are to medical problems is evidenced in the major publicly funded screening program—Early and Periodic Screening, Diagnosis and Treatment (EPSDT). In that program in Texas, 2 of every 3 poor children screened for medical problems need further diagnosis and treatment.

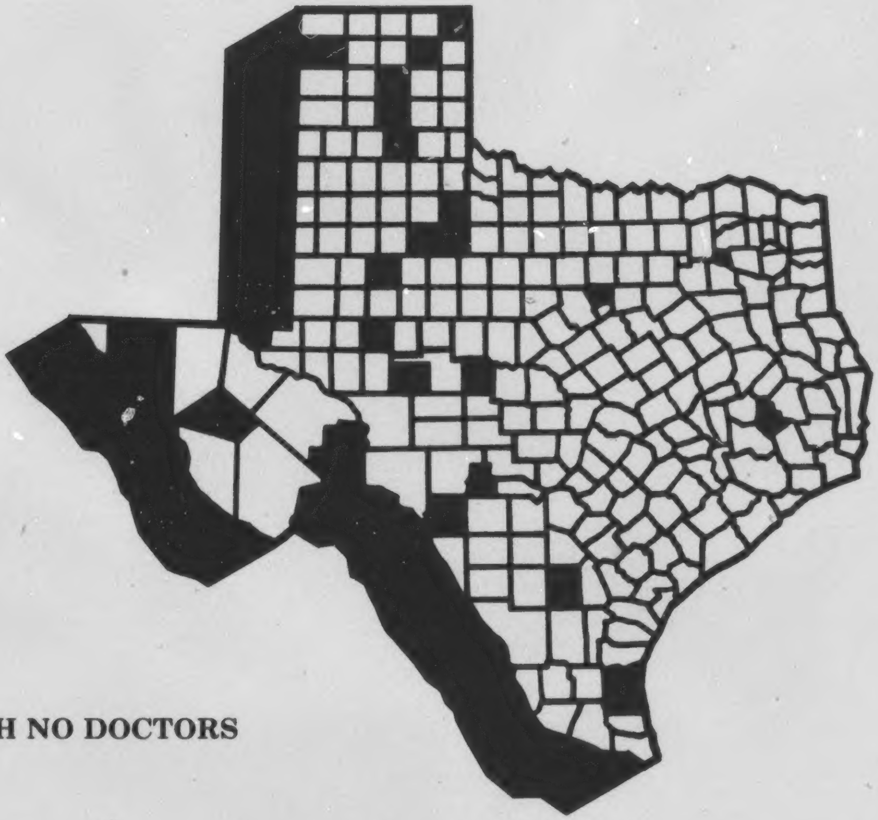
Proper nutrition is an essential part of preventive health care for children. Research has shown that infants who are malnourished during the last three months before birth and the first 12 months after birth have arrested brain development—critical when one knows that the brain reaches most of its adult size by age 1. Studies have also shown that iron is generally lacking in the American diet: 30-40 percent of all children 1-5 are below the standard. One researcher has found that half of all hyperactive children can be "cured" if synthetic colorings and flavors are removed from their diets. And allergists are learning that children's allergies may be linked to certain foods—cow's milk, wheat, citric fruits—and can be reduced through changing the diet in infancy.

Many of the new health problems of Texas children—drug abuse, emotional disturbance, pregnancy, auto accidents—appear to have their roots in the social and economic condition of families. Sexual activity among teenagers has resulted in alarming increases in venereal disease and pregnancy. Authorities say that today's children need health and parenting education through their own families, the schools, churches and youth agencies; they also need expanded reproductive services and pregnancy counseling. Another serious problem linked to the way Texans live is automobile accidents. Although youngsters cannot obtain a driver's license until their late teens, hundreds of teenagers are killed or maimed in auto smash-ups every year.

The present health care system in Texas and the nation is focused on acute care and on adults. Actually, society might be better served if the health care system shifted to preventive care that puts children first.

## 21

# 24 Texas counties had no medical doctor in 1975.



■ COUNTIES WITH NO DOCTORS

**COMMENT:** Some rural counties of Texas are still without doctors—a situation little changed since 1972 when 23 counties had no M.D. The lack of doctors can be explained by the sparse population of these counties and by the concentration of doctors in urban areas. However, Texas has fewer physicians per 100,000 population: 143 in 1975 compared to 166 for the U.S. in 1974. Significant too, is the fact that 190 Texas counties have no obstetrician-gynecologist, the specialty that directly affects the health of mothers and infants. When a family has to drive to the next county for medical attention or specialty care, visits are likely to be infrequent and more of an emergency nature.

**SOURCE:** Texas Medical Association 1972 and 1975; *U.S. Fact Book 1978*.

# 22

# 7,902 infants were born in Texas in 1977 without prenatal care.

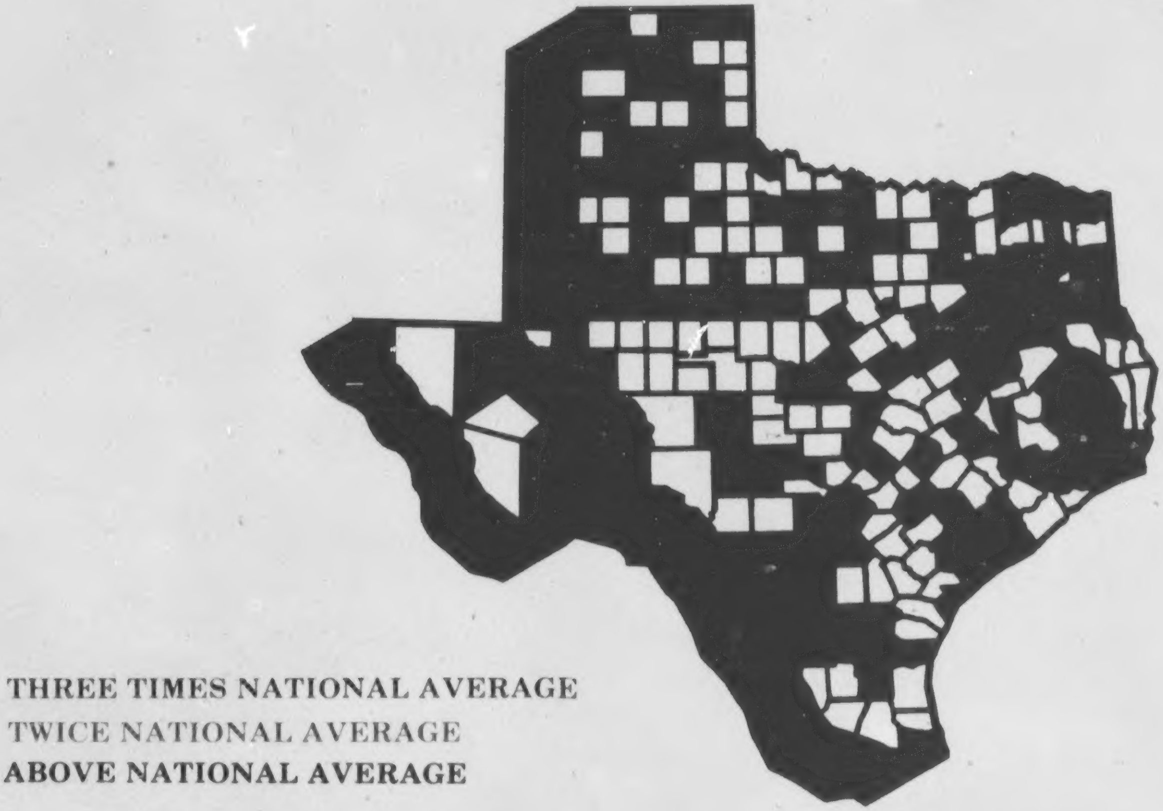
**COMMENTS:** Surveys have shown that 3-7 percent of infants are born in Texas each year to mothers who have received no medical care during pregnancy. Without prenatal care, mothers stand a higher chance of giving birth prematurely, having a difficult delivery, and bearing a physically or mentally impaired baby. Low birth weight alone is three times more likely when mothers have had no prenatal care. Poor mothers, unmarried women and teenagers are less likely to receive prenatal care than other mothers.

**SOURCE:** Texas Department of Health, Texas Residence Live Births for 1977; Texas Household Survey of Families with Children under Six, 1973; *America's Children 1976*, National Council of Organizations for Children and Youth.

# 137 Texas counties have infant death rates higher than the national average.

**26 have rates twice as high and 9 have rates three times that of the U.S.**

## 23



THREE TIMES NATIONAL AVERAGE

TWICE NATIONAL AVERAGE

**ABOVE NATIONAL AVERAGE**

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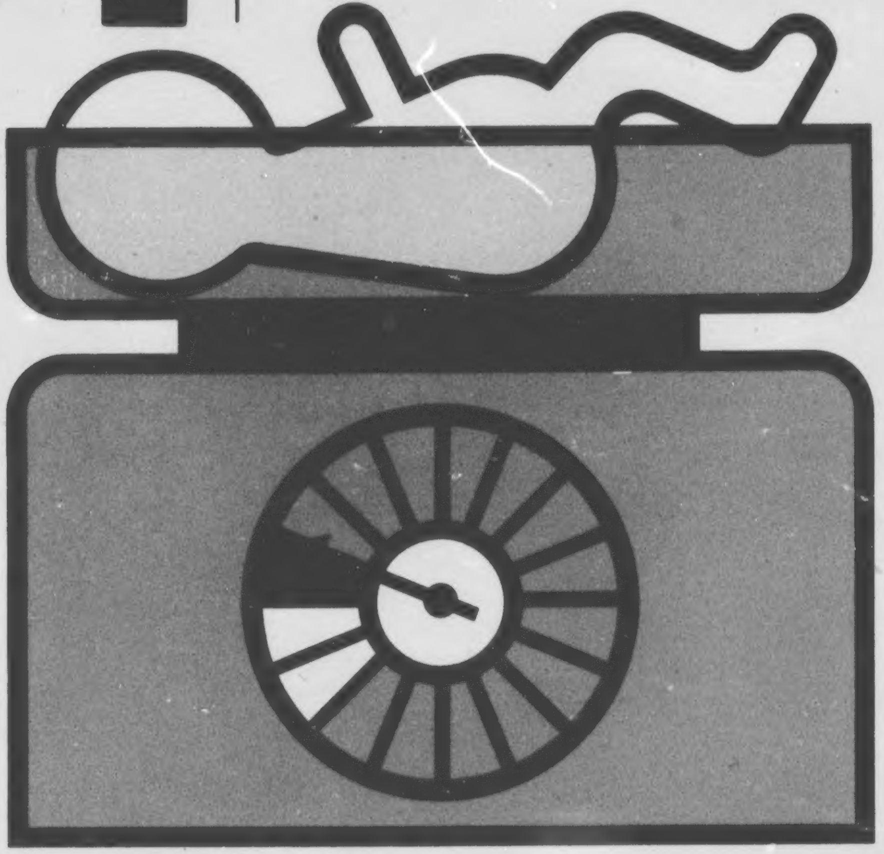
**COMMENT:** Although the infant death rate is dropping in Texas and the rest of the nation, over half of Texas' 254 counties are faring worse than the national rate of 14.0 per 1,000 births. In some counties, the high infant death rate can be explained by the low number of births. Even so, the infant death rate deserves attention because it is more than a simple measure of mortality among babies under 1 year old; it is a standard that scientists use to indicate the general level of health in a population. A high rate means greater likelihood for illness, poor conditions for birth, unhealthy mothers, and an environment which is more hazardous to life and health.

**SOURCE:** *Vital Statistics 1977* and Bureau of Vital Statistics, Texas Department of Health.

# 24

## 16,752 infants born in Texas in 1977 had a low birth weight.



**COMMENT:** Premature or low birth weight (less than 5 and one-half pounds) is an indicator of high risk. It is associated with almost half of all infant deaths and figures substantially in many illnesses, birth injuries, and neurological defects which may result in life-long mental retardation. Low birth weight is twice as high among teenage mothers as older mothers. Studies have shown that mothers are more likely to bear low-birth-weight babies if they consumed alcohol, smoked or were malnourished in pregnancy.

**SOURCE:** Texas Department of Health, Vital Statistics: *11 Million Teenagers*, Planned Parenthood Federation of America, 1976; and "Alcohol and Your Unborn Baby," DHEW No. (ADM) 78-521.

# 25

# Low-income mothers and children are at great risk for nutritional deficits.

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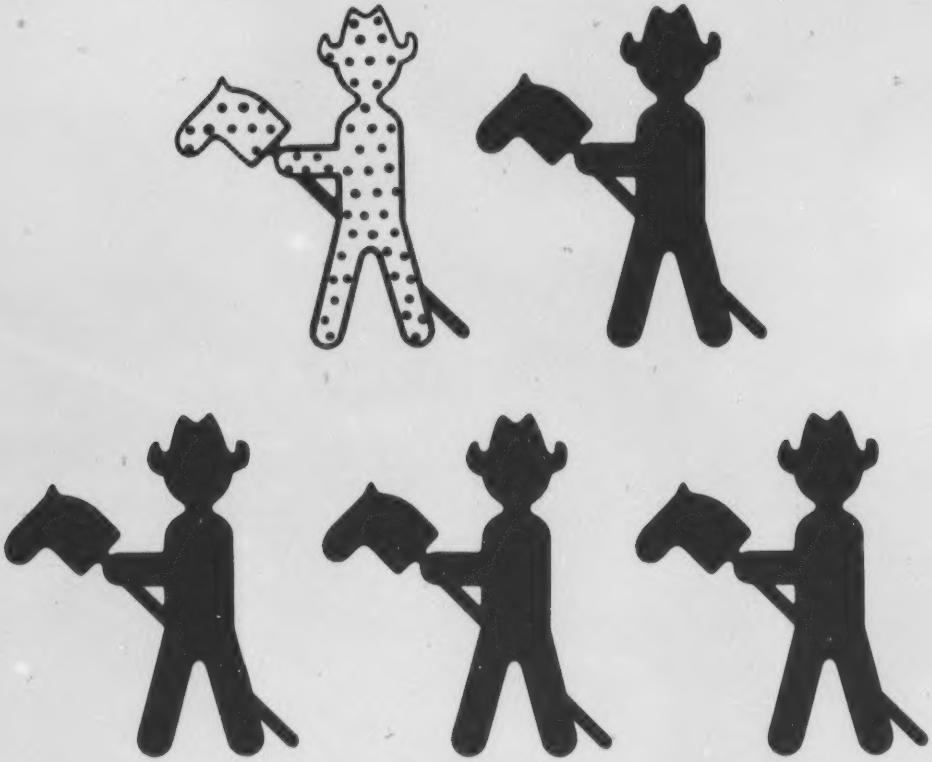
**COMMENT:** A study of low-income pregnant mothers and children before beginning a food supplement program in Texas found that 77-91 percent had a deficient diet and that many were anemic and had inadequate growth or weight gain. Malnourished pregnant mothers stand a high chance of having complications in pregnancy and childbirth and bearing babies with physical or mental handicaps. In children, improper diet can prevent a child from reaching full height, delay bone development, cause skin ailments, increase susceptibility to disease and cause other problems.

**SOURCE:** Medical Evaluation of the Supplemental Food Program for Women, Infants and Children (WIC), Texas Department of Health, July 1, 1977.

# 26

## An estimated 286,718 preschool children in Texas are not adequately immunized against childhood diseases.

**Texas nearly had a measles epidemic in 1977—2,032 cases.**



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**COMMENT:** Nearly all preschool children receive one or two doses of vaccine for polio, diphtheria, pertussis and tetanus, but available data indicate that about 20 percent of preschool children do not complete the recommended series of doses and boosters needed for full protection. Texas law requires full immunization of all children entering school and licensed day care centers, but children can be fully protected by age 2. Despite expanded public health services, a wider availability of vaccines and health education campaigns, young parents continually need to be informed about the danger of death or lifetime impairment that such diseases can cause.

**SOURCE:** Preliminary immunization data from Assessment Program: Licensed Day Care Centers and "Fact Sheet: Texas Immunization Program," Texas Department of Health.

# 27

# Accidents are the chief cause of death in Texas children 1-19 years old.

**60 percent of accidental deaths involve motor vehicles.**

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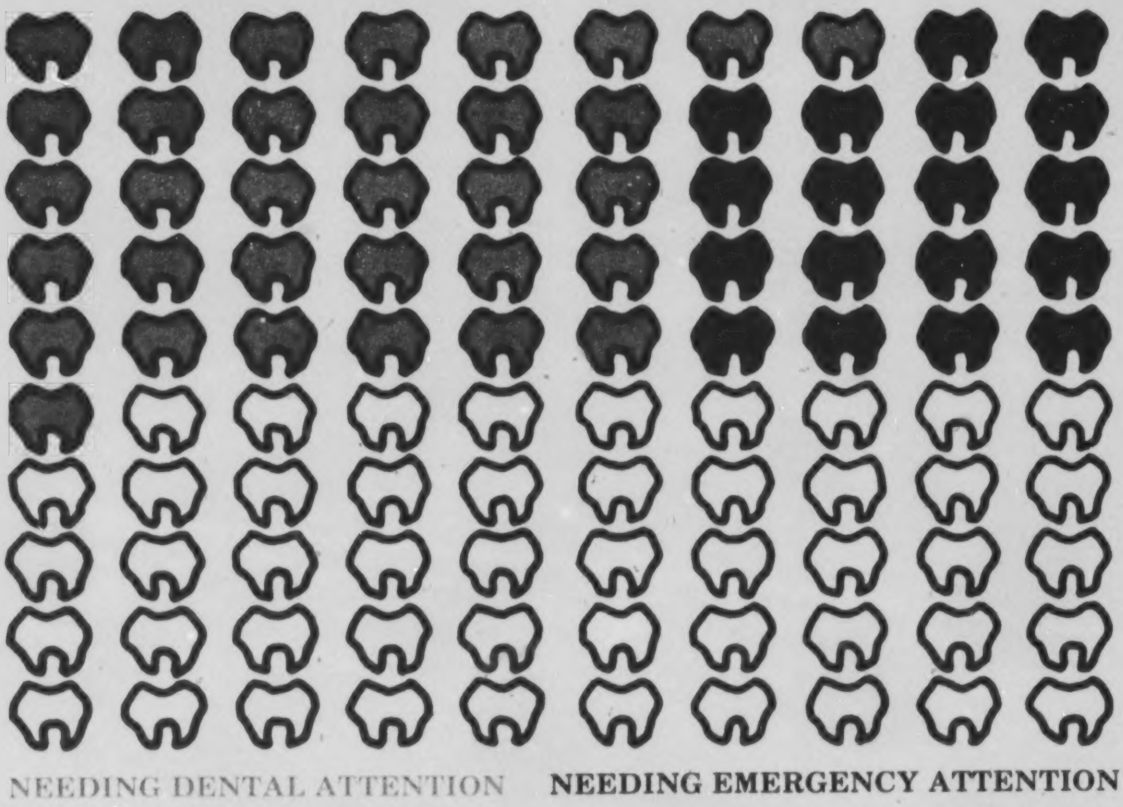
**COMMENT:** After age 1, accidents account for more deaths in children than any other cause—54 percent of the 2,874 deaths in children 1-19 years old in 1977. The older the child, the more likely he or she would have died in a motor vehicle accident, presumably because children begin driving in their teens. Of the total 1,542 children's fatal accidents in 1977, 929 involved a motor vehicle. Fires and falls also accounted for significant numbers of accidental deaths. Most serious accidents need not happen. They can be prevented through safety education and adequate precaution. Younger children must rely totally on their parents to recognize hazards, safeguard against accidents and keep watch over them.

**SOURCE:** *Vital Statistics 1977*, Texas Department of Health.

# 28

## In five Texas counties, over half the school children surveyed needed dental attention

**—nearly 18 percent on an emergency basis.**



**COMMENT:** Probably the vast majority of Texas school children own toothbrushes and brush at least once a day, but very few (14 percent) floss regularly—which is essential to preventing the build-up of decay-producing plaque. More than a third of the children surveyed had not seen a dentist for a year or more, and another third could not remember their last visit. National data indicate that adequate dental care is especially lacking in the preschool years—when permanent teeth are forming in the gums and when children are developing attitudes about dental hygiene. Half of all children have tooth decay by age 2; by school age, they have an average of three decayed teeth.

**SOURCE:** "Tattletooth Evaluation Report," Bureau of Dental Health, Texas Department of Health, July 1978; *America's Children 1976*, National Council of Organizations for Children and Youth.

# 29

# More than half of all teenagers 15-19 years old are sexually active.

## Also one-fifth of 13 and 14 year olds.

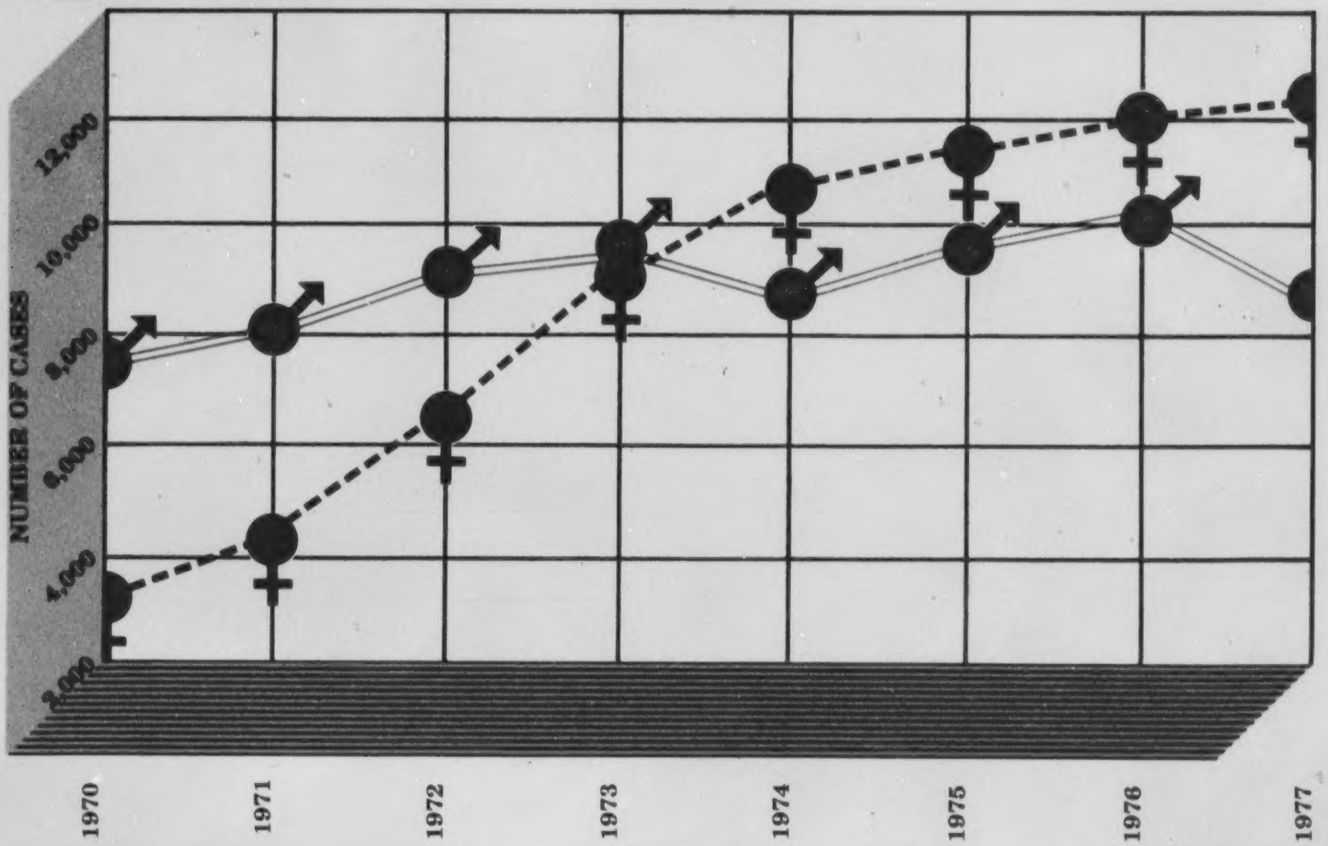
**COMMENT:** Increasing sexual freedom is not lost on today's teenagers. Though data specific to Texas is lacking, one national study reports that teens from all income and ethnic groups are beginning sexual intercourse at earlier ages. As a result, teens are running a greater risk of venereal disease and unwanted pregnancy. The Director of the Kinsey Institute for Sex Research says the reason may be peer pressure: "The undecided or timid adolescent is in a bind. There's no pillar to cling to. They can't say 'I won't do it because society says no or the church says no.' So there's a lot of heat put on them."

**SOURCE:** *11 Million Teenagers*, Planned Parenthood Federation of America 1976; *Austin American-Statesman*, June 25, 1978.

# 30

## From 1970 to 1977, gonorrhea among teenage girls in Texas jumped 313 percent.

**Among all children 19 and under, gonorrhea has more than doubled—10,418 cases in 1970 compared to 21,012 cases in 1977.**



**COMMENT:** One of the most alarming increases of venereal disease is gonorrhea among girls 15-19. Gonorrhea symptoms are less noticeable in women than men and accurate diagnosis is possible only through laboratory cultures. Gonorrhea can cause severe pain, possibly death, and sterility in both men and women; it may also cause arthritis and other complications in men. Estimates are that only 1 in every 4 cases of gonorrhea is actually reported. Therefore, among teenagers, there may be two cases of gonorrhea in every Texas classroom.

**SOURCE:** Texas Department of Health, Infectious Disease Control Division; *Venereal Disease: Answers to the Most Frequently Asked Questions about VD*, Texas Department of Health.

# One-third of all legal abortions are obtained by teenagers.

**COMMENT:** If national data hold true for Texas, legal abortion is rapidly becoming an important birth control method among teenagers. Between 1972 and 1975, in one national study, the abortion rate among teens had risen by 60 percent. Without abortions, there would be an even higher number of out-of-wedlock births and teenage births. Many teens do not use contraception, mainly because they lack information about sex and birth control, and contraceptives are not available when they need them.

**SOURCE:** *11 Million Teenagers*, Planned Parenthood Federation of America, 1976; Lewis Mondy, Director of Family Planning, Texas Department of Human Resources.

# 32

# 1 of 5 babies born in Texas in 1976 had a teenage mother.

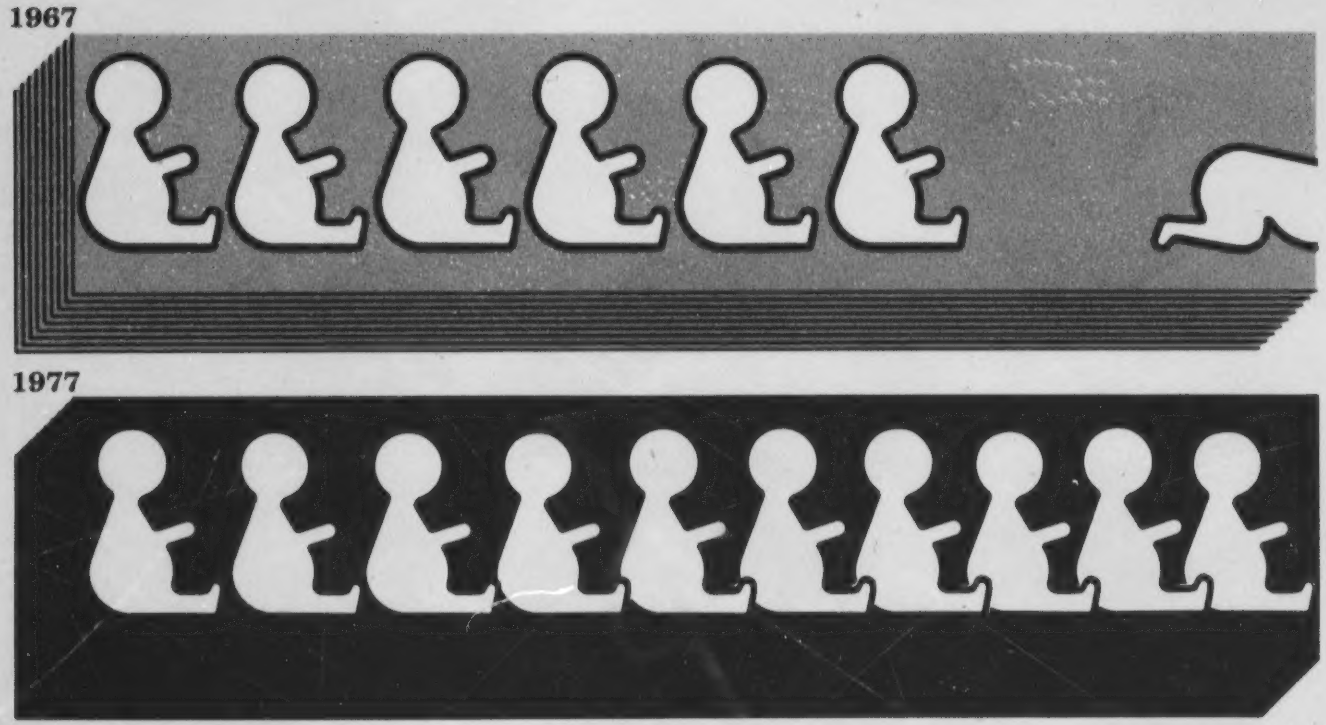
---

**COMMENT:** Adolescent pregnancy in Texas as in the nation is being called an "epidemic." One national study reports that half of all teenage births are unintended. While fertility has declined since the 1960s among women generally, including women 18-19 years old, fertility among 14-17 year olds has not. Three-fourths of mothers 17 and younger have no health insurance at all, and even more are not covered for maternity expenses, thus increasing the probability that these mothers will not get adequate prenatal and medical care. Infants born to teenage mothers are more subject to death, birth defects and low birth weight than babies born to older mothers, and the teenage mothers themselves are more at risk for illness and injury.

**SOURCE:** Texas Department of Health, Bureau of Vital Statistics; *11 Million Teenagers*, Planned Parenthood Federation of America, 1976.

# The number of babies born to girls 14 and under in Texas has increased 64 percent in ten years.

## 33



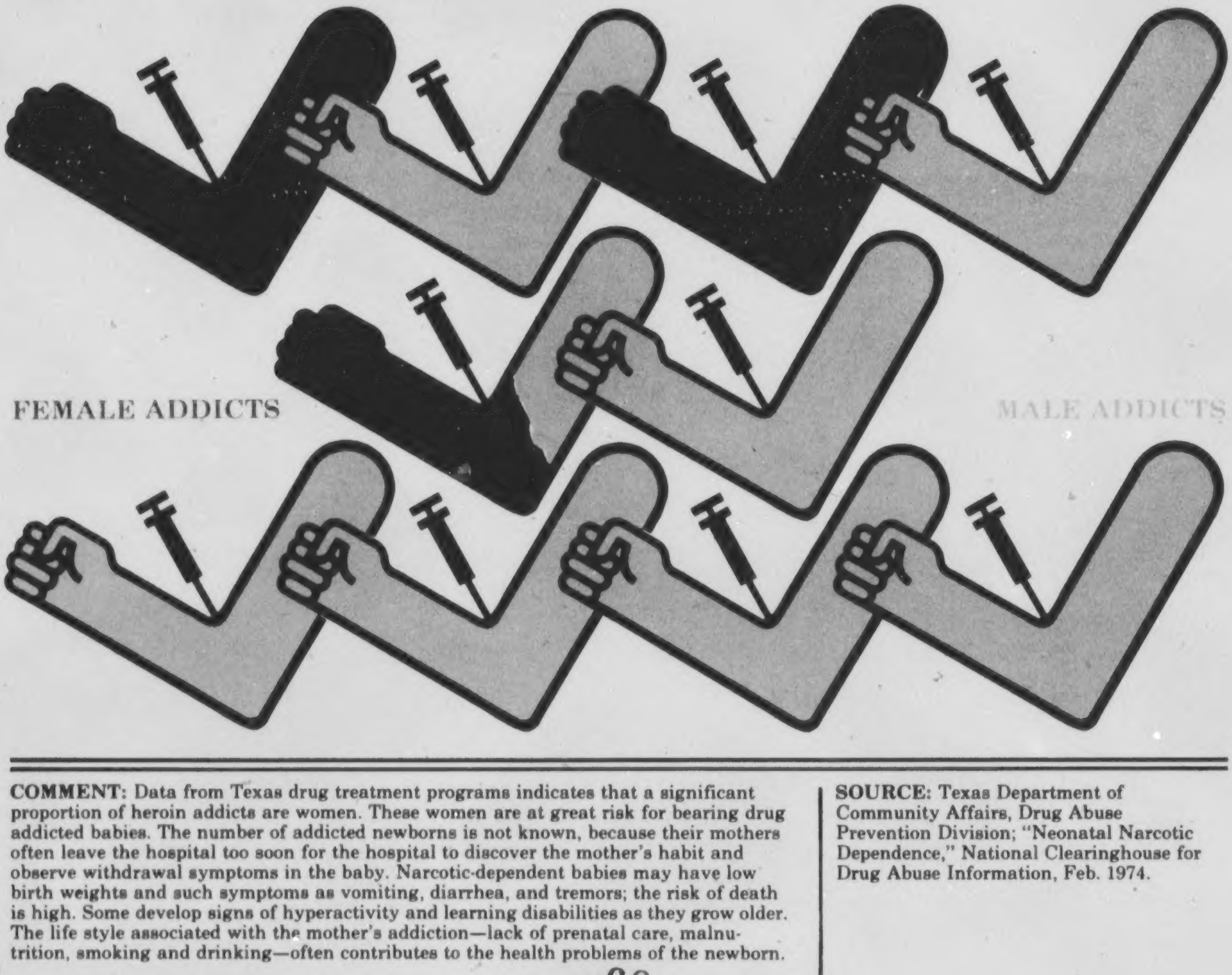
**COMMENT:** Babies born to girls under age 15 are nearly two and one-half times more likely to die or be born with neurological defects than babies born to mothers in their 20s. A significant proportion of these babies are likely to have low birth weights. Mothers under 15 are more likely to die from toxemia than older mothers, and they are more subject to illness because pregnancy depletes the nutritional reserves needed for their own growth. The vast majority of very young mothers do not get any prenatal care through the first trimester of pregnancy and nearly one quarter of them get no prenatal care at all or delay it until near the time for the child to be born. Five out of six of these mothers are not married.

**SOURCE:** Texas Department of Health, Bureau of Vital Statistics; *11 Million Teenagers*, Planned Parenthood Federation of America, 1976.

# 34

## 26 percent of heroin addicts in Texas are women.

### 97 percent are child-bearing age (15-45).



**COMMENT:** Data from Texas drug treatment programs indicates that a significant proportion of heroin addicts are women. These women are at great risk for bearing drug addicted babies. The number of addicted newborns is not known, because their mothers often leave the hospital too soon for the hospital to discover the mother's habit and observe withdrawal symptoms in the baby. Narcotic-dependent babies may have low birth weights and such symptoms as vomiting, diarrhea, and tremors; the risk of death is high. Some develop signs of hyperactivity and learning disabilities as they grow older. The life style associated with the mother's addiction—lack of prenatal care, malnutrition, smoking and drinking—often contributes to the health problems of the newborn.

**SOURCE:** Texas Department of Community Affairs, Drug Abuse Prevention Division; "Neonatal Narcotic Dependence," National Clearinghouse for Drug Abuse Information, Feb. 1974.

# 35

# An estimated 160,306 Texas women alcoholics are at risk for bearing babies with fetal alcohol syndrome.

---

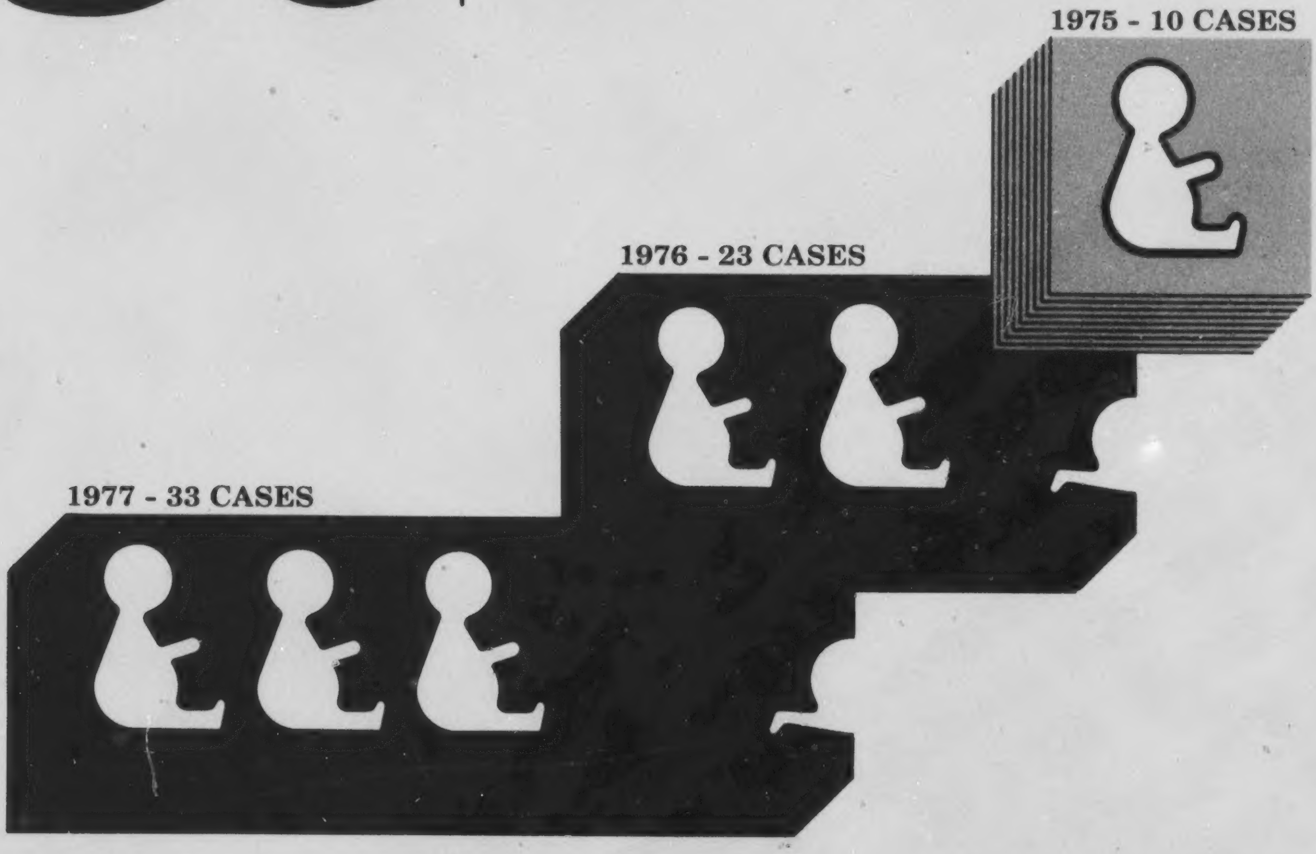
**COMMENT:** Of the more than 180,000 female alcoholics in Texas in 1977, 89 percent are of child-bearing age (15-45). All women who drink during pregnancy pose health risks for their unborn baby, but alcoholics stand a greater chance of giving birth to a baby with fetal alcohol syndrome. Such infants are abnormally small, have defective hearts and limbs, and have low IQs. Information about the syndrome is so new that statistics on incidence are not being collected. Physicians and hospitals are just beginning to learn about the syndrome enough to recognize it in newborn infants. The March of Dimes believes the syndrome so serious as to warn women to abstain from alcohol entirely during pregnancy.

**SOURCE:** "Women and Alcohol," Texas Commission on Alcoholism, 1977.

# 36

## Babies born with congenital syphilis in Texas increased by a third in one year.

**Among women of child-bearing age (15-44), infectious syphilis has increased 35 percent since 1975.**



**COMMENT:** Infectious syphilis is a serious disease spread by sexual contact. When an infected pregnant mother passes the disease on to the baby in her womb, the baby is born with "congenital" syphilis. If not miscarried or stillborn, such babies may be born blind or with severe tooth and bone deformities. Or theirs may be a hidden syphilis that later can cause blindness, deafness, paralysis, insanity and death. Syphilis can be detected through a blood test and treated with antibiotics. A pregnant mother reduces her chances of passing syphilis to the unborn child if she is treated before the fifth month of pregnancy.

**SOURCE:** Texas Department of Health, Infectious Disease Control Division; *Venereal Disease: Answers to the Most Frequently Asked Questions about VD*, Texas Department of Health.

## *“So, Boy, don’t you turn back”*

When health care is neglected or goes awry, handicaps are often the result. Handicaps refer to varying degrees of blindness, deafness, physical impairments, mental retardation, language and learning disabilities, speech impairments, emotional disturbance and other disorders. Handicaps such as these are more likely to occur among the poor than among higher income levels. And because minority children are more often living in poor families, minority children are generally less healthy and more handicapped than white children. Ronald W. Conley in *The Economics of Mental Retardation*, for example, reported that children of the poor are 13 times more likely to be retarded than children of upper and middle classes, and that nonwhite children are 6 to 7 times more likely to be retarded than whites.

How extensive handicaps are among the children of Texas is not known, but authorities estimate that 12-15 percent of all Texas children are handicapped to the point that they need some sort of specialized help. Obtaining accurate statistics on handicapped children is difficult because definitions of handicaps and methods of collecting data vary widely. For example, learning disabilities include minimal brain injury, according to some agencies but not to others. The matter is complicated by the fact that some handicapping conditions cannot be diagnosed with certainty until a child grows older or until more accurate tests are developed. Often, for example, it is difficult to determine whether a child is learning disabled or mildly mentally retarded.

One of the dangers in working with handicapped children is labeling. Labeling a child by a handicap can affect the way teachers and parents treat the child, making the problem worse that it really is and inadvertently pushing the child farther away from normality. Instead of labeling children by their handicaps, authorities now are referring to them as children with "special needs," needs that are more extensive than those of other children.

In general, of course, handicapped children are more *like* normal children than they are different. They need to feel loved, to express feelings and be understood, to feel good about themselves, to succeed and fail. Handicapped children do require special services; often the more seriously handicapped they are, the more services they require. Some handicapped children are multiply impaired. Mental retardates, for example, may suffer from hearing loss, visual problems and psychiatric illness.

Because handicapped children require special services, they cost more to rear than normal children. Families with handicapped children may either have to forego these special services or concentrate their resources on the impaired child at the expense of other children in the family. Most handicapped children are cared for by their own families. Only when the family cannot afford to provide care or when the handicap is very severe are children placed in institutions.

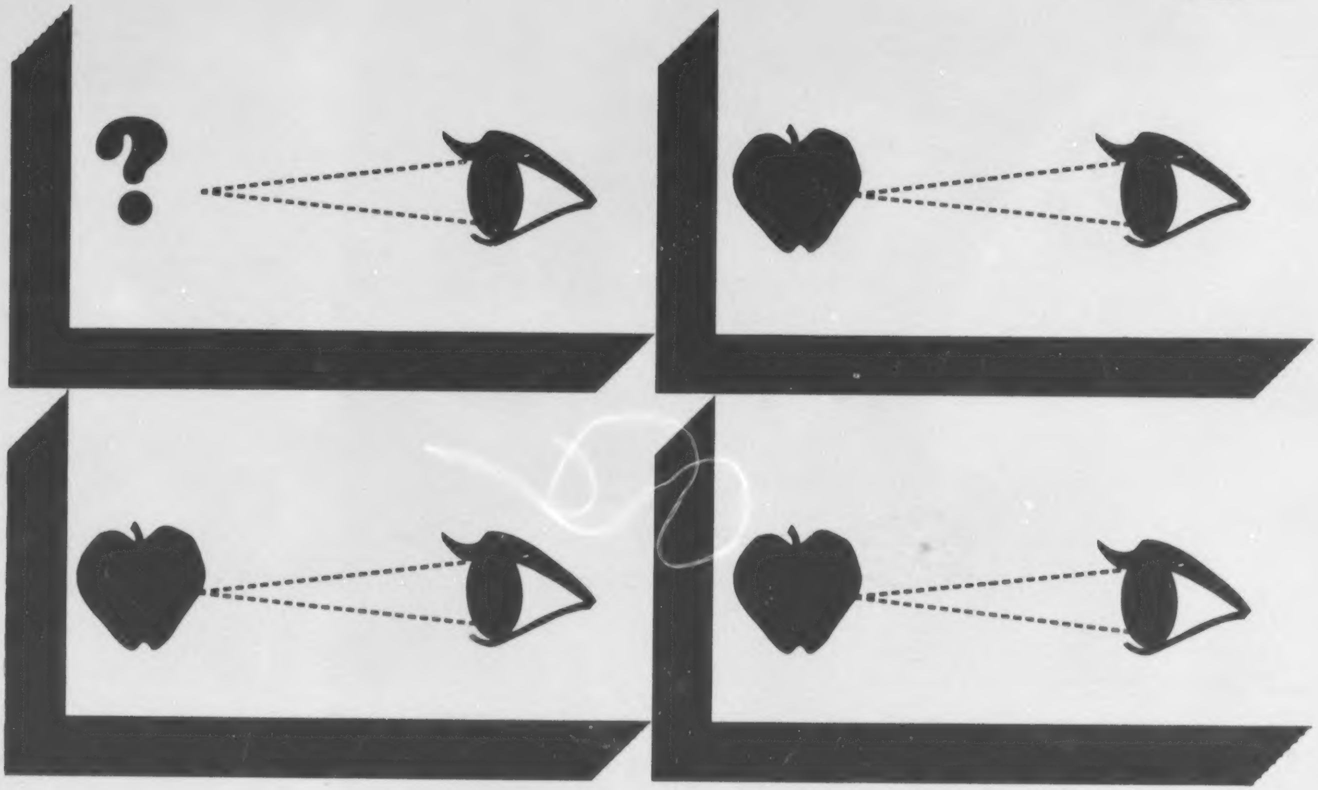
The brighter side of childhood for handicapped children is that they are finally getting the services they need. In 1969 the Texas Legislature authorized the Comprehensive Special Education program for children 3-21 in the public schools. The foresight of the Legislature in creating this program put Texas ahead of much of the rest of the nation by six years. In 1975, Congress passed a similar law—Public Law 94-142—guaranteeing a free public education to all handicapped children. The law provides that an individualized educational plan be developed for each handicapped child to fulfill his or her own unique needs, and that the handicapped be educated as much as possible with the non-handicapped (mainstreaming).

Even with the advances that have been made in serving handicapped children, some problematic issues remain. As mentioned elsewhere in this book, age 3 is often not early enough for handicapped children to begin receiving educational services. And what exactly are educational services? Do they include medically prescribed therapy and training? The Texas Education Agency has been charged with the responsibility for carrying out Public Law 94-142. What about the responsibilities of the other agencies which serve handicapped children? Educating handicapped children is costly. One major need is for related services, such as occupational therapy, music therapy, recreation and physical education, and for trained personnel to provide these services. Most school districts cannot afford the services or the personnel.

Costly as it is, special education for handicapped children is money well spent. As the Texas Education Agency has often said, "It costs $20,000 to educate a handicapped child, but $200,000 not to."

# 1 in 4 school-age children has a vision problem.

# 37

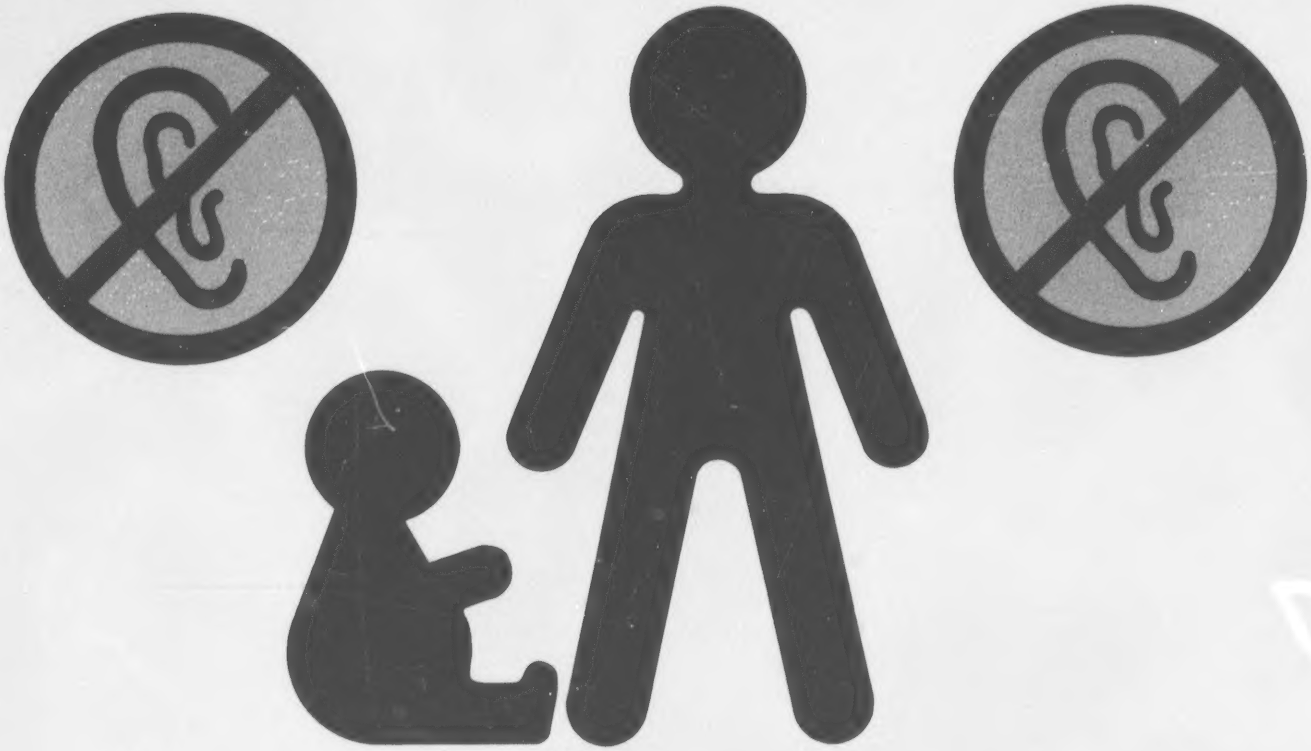


**COMMENT:** Most children with sight problems can have their vision corrected with eyeglasses. For 36,126 children 0-18 in Texas, impaired vision is a more serious problem—ranging from crossed eyes to total blindness. Good vision is important during the school years for learning and the child's self-image. Certain vision problems should be detected and treated much earlier—in the preschool years. Among children 3-5 years old, 1 in 20 has a vision problem. One-fifth of those are amblyopic (vision is suppressed in one eye); damage can become permanent if not corrected before school age.

**SOURCE:** Texas Commission for the Blind; *State of Texas Visually Disadvantaged Population Planning Handbook*, Texas Society for the Prevention of Blindness, July 1977.

# 38

## Of those who become deaf in childhood, 1 in 2 becomes deaf before age 3.



**COMMENT:** Persons who become severely deaf before the age of 19 are rare in the general population, but those who do are more likely to acquire the handicap in infancy. The first three years of life are critical, because some deafness may be corrected by appropriate medical treatment or a hearing aid. If a child's hearing is still functionally defective even after such measures are taken, education and parent counseling become important. The earlier a hearing impaired child and the family begin to learn communication skills, the greater the child's chances for leading a normal life. The likelihood for needing special education in school or expensive rehabilitation also drops dramatically.

**SOURCE:** Texas Education Agency, Division of Services for the Deaf.

# 39

# More than 93,000 Texas children are speech impaired.

**COMMENT:** Next to language and learning disabilities, speech impairment is the largest category of handicapping conditions among children. Speech impairment is defined as a communication disorder such as stuttering or impaired articulation which adversely affects education. The statistic above reflects those school children in special education classes in 1976-77 whose only handicap was a speech impairment; it does not reflect numerous other children with speech difficulties who were also deaf, cerebral palsied, autistic or otherwise impaired. Though little publicized, speech impairments can have negative effects on emotional well-being, social development with peers, and the ability to learn and do well in school.

**SOURCE:** Texas Education Agency, Special Education Department.

# 40

# 146,000 Texas school children have a language or learning disability.

**COMMENT:** About six percent of the 2.5 million children in Texas public schools are receiving special education services because of a language or learning disability (defined as a deficiency in acquiring language and learning skills including the ability to reason, think, speak, read, write, spell or make mathematical calculations). Studies have shown that more boys than girls seem to be afflicted, at a ratio of 5 to 1. Of concern to many educators and youth counselors is the apparent high correlation between learning disabilities and juvenile delinquency. About half of the children in Texas Youth Council facilities have learning problems.

**SOURCE:** "The Learning Disabilities Puzzle," *Texas PTA Magazine*, Oct. 1975; Texas Education Agency, Special Education Department; Texas Youth Council.

# 41

## 3,960 Texas handicapped children were found who had not been in school or who needed additional services.

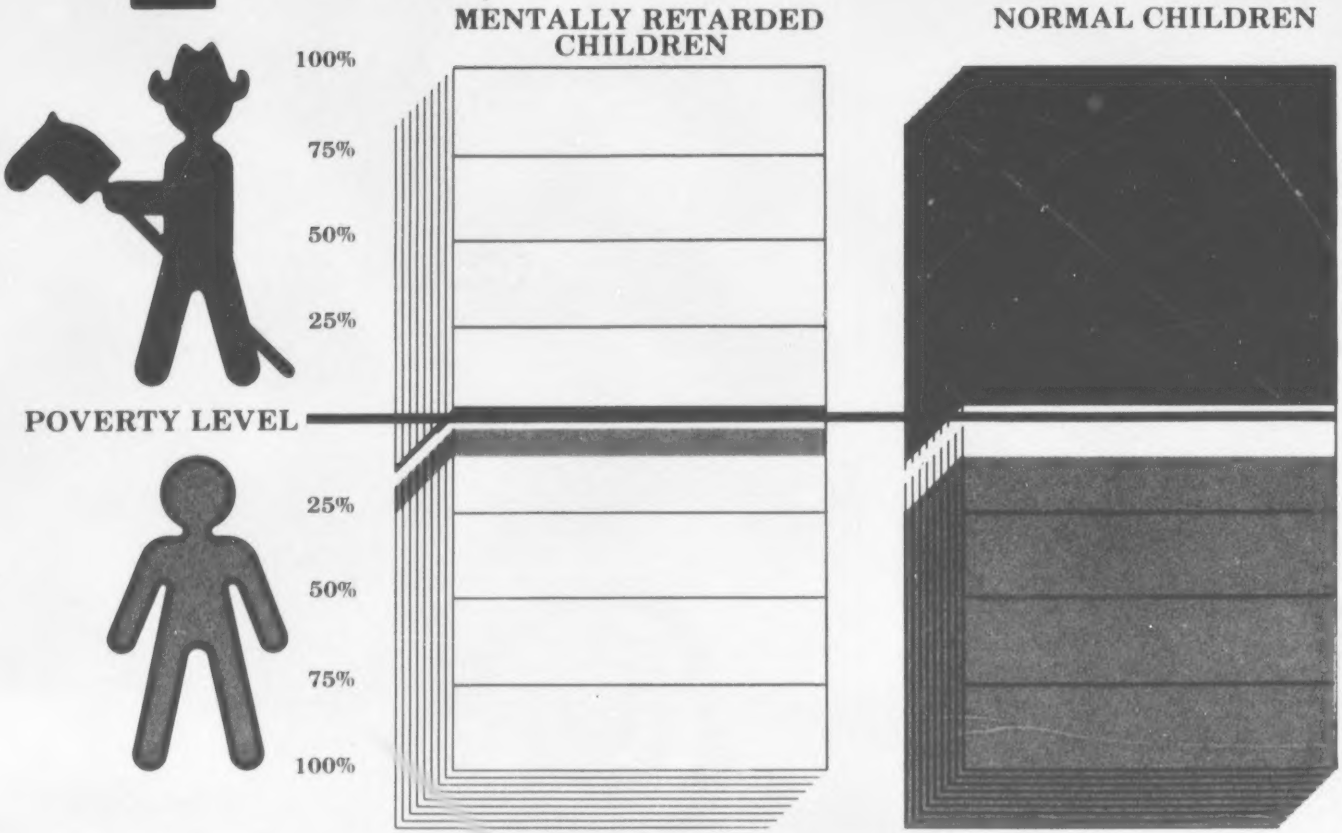
**47 percent were school age.**

**COMMENT:** A project to identify and locate handicapped children not in school or not receiving educational services reported that of the handicapped children identified over a three-year period, 1,874 were 6-21 years old. Texas public schools have been phasing in special education for handicapped children 3-21 years old since 1970. Most parents had probably been unaware that there were services through the public schools. While all children found were placed in an appropriate program, the chances for leading a productive life are better the earlier a handicap is identified. The formative years for a child's development are 0-6; if nothing is done until school age, the child may be more functionally impaired.

**SOURCE:** Texas Education Agency, Project Child Find of the Special Education Department.

# 42

## An estimated 7 percent of Texas children below the poverty level are mentally retarded—compared to 2 percent of nonpoverty children.



**COMMENT:** Mental retardation is linked to many factors associated with poverty, such as malnutrition, lack of prenatal care, lack of medical care during childbirth, substandard living conditions, higher incidence of disease and inadequate pediatric care. Assuming all social classes have the same genetic potential, "almost 80 percent of mental retardation in the United States is caused by environmental conditions which lead to brain injury or in some other way impede intellectual development." (Conley) In short, much mental retardation, especially the mild type, did not have to happen—and many persons slightly above the threshold of retardation could be functioning at a higher intellectual level.

**SOURCE:** Developmental Disabilities State Plan, Texas Department of Mental Health and Mental Retardation, 1978; Robert W. Conley, *The Economics of Mental Retardation*, 1973.

# 43

# An estimated 198,376 Texas children 0-20 years old have developmental disabilities.

**COMMENT:** "Developmental disabilities" refer to mental retardation and a group of other neurological handicapping conditions—namely, cerebral palsy, epilepsy and autism. Causes include brain injury, malnutrition, diseases of the central nervous system, and genetic and chemical abnormalities; causes of some disabilities, especially autism, are unknown. Such a condition substantially impairs a person's ability to function normally. Developmentally disabled children need developmental day care, training in daily living skills, special schooling, and eventually job training.

**SOURCE:** Developmental Disabilities State Plan, Texas Department of Mental Health and Mental Retardation, 1978.

# 44

# 2,700 children are in the state schools for the mentally retarded.

**Another 210 children are in the State School for the Blind and 450 in the State School for the Deaf.**

**COMMENT:** Only a fragment of the state's handicapped children are in residential institutions, largely because of the trend toward community-based care and special education in the public schools. There may always be a need for institutional care; how much depends on increased preventive measures and expanded community services. Enrollments in the state schools for the blind and deaf are dropping, but state schools for the retarded have active waiting lists. Children in institutions are likely to be older and more seriously impaired: more than half those in the Blind School are multiply handicapped, and many of those in state schools for the retarded are severely retarded.

**SOURCE:** *Data Book 1977*, Texas Department of Mental Health and Mental Retardation; Texas School for the Blind; Texas School for the Deaf.

## *"And reachin' landin's"*

Free public schools have been a part of Texas life since the days of early statehood in the mid 1800s. The mood of the nation at the time was that free, compulsory and universal education could equalize opportunity for all children. The belief was that children could overcome poverty and other deficiencies of birth by attending school, learning to read and write, and acquiring knowledge and skills that would enable them to enter the labor market.

In the 1970s, education has become one of the most highly criticized aspects of life in Texas and the rest of the nation. Scores on scholastic achievement tests have been dropping in recent years, and increasing numbers of young people are functionally illiterate—that is, they cannot read or write well enough to function in society. Joseph Califano, Secretary of the U.S. Department of Health, Education and Welfare, has said that 15 percent of 17-year-olds are illiterate. About 14 percent of students in high school will drop out before graduation, according to the Panel on Youth of the President's Science Advisory Committee. All the while, newspaper headlines are chronicling increased violence and vandalism in the schools. One survey found that teachers in urban schools have 1 chance in 55 of being attacked; in rural schools, the risk is 1 in 500. Schools are also reporting growing problems with discipline and absenteeism. In fact, in some of Texas' largest school districts, including Houston, average daily attendance is dropping even though the population is growing. What has gone wrong?

In the first place, schools are not the great economic equalizer they were once thought to be. Large scale studies undertaken in the 1960s by James Coleman have found that school performance is greatly influenced by the social, economic, educational and cultural background of the child. Further studies by Christopher Jencks in the 1970s revealed that the income one earns in later life bears almost no relationship to academic achievement in school. In short, success in school begins at home—how successful a child will be depends heavily on the family income, the parents' education and other accidents of birth.

Just as important an influence as parents' socio-economic status is the interest they show in their child's learning. In 1975 Houston School Superintendent Billy Reagan cited lack of parental interest as one of the reasons that poor children did not achieve in school. Massive federal funding amounting to more than $70 million for programs aimed at disadvantaged children in Houston schools had had little effect, he said.

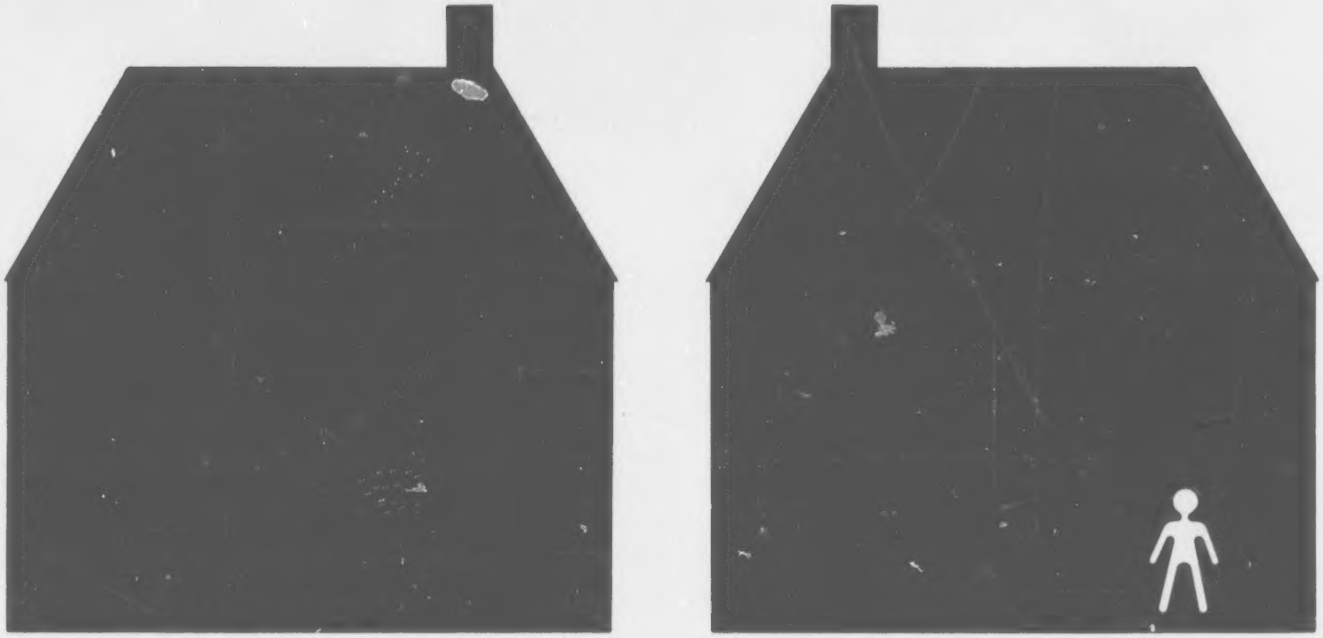
Speculation about the causes of functional illiteracy of students has covered many factors—lax attitudes of parents, heavy reliance on television and the telephone for information instead of reading and writing, "social promotion" to the next grade instead of retaining a failing student in the same grade for another year, classrooms that are too large, teachers' inability to discipline unruly students. Some say that schools are too boring, too rigid, and don't meet students' needs. Others say that schools don't emphasize the basics enough. Nearly every Texas community has its "back to basics" faction, urging that schools go back to stressing reading, writing and arithmetic instead of "fluff" courses. Authorities say, however, that the "back to basics" approach is not enough; that in today's highly technological society, people have to be literate to a higher degree than ever before.

As for violence, vandalism and behavior problems, some advocate stricter discipline. Such a "crackdown" may do little more than intensify the problem, according to the National School Public Relations Association. Behavior problems may be related to situations in the schools themselves. The Texas Council on Crime and Delinquency reports evidence that some schools may have an indirect effect on delinquency by creating conditions that may result in failure for certain students. According to the Council, there are strong links between academic failure, truancy, dropouts and delinquency.

Schools need not be helpless victims to violence and other problems, according to the Safe School Study Report to Congress, issued by the National Institute of Education in January 1978. The Report suggests: (1) students taking part in rule-making and enforcement, (2) treating all students fairly and equally, (3) making subject matter more relevant to student interest and needs, and (4) having smaller classes. The Texas Council on Crime and Delinquency recommends greater parental involvement, innovative administration, community schools (so that school buildings are used at night), and alternative schools, which emphasize vocational education. Other approaches include early and frequent testing of students so that remediation can occur before learning problems get out of hand, inservice training for teachers, and controlled use of television.

# Enrollment in public kindergarten in Texas has increased only 12 percent in four years.

# 45

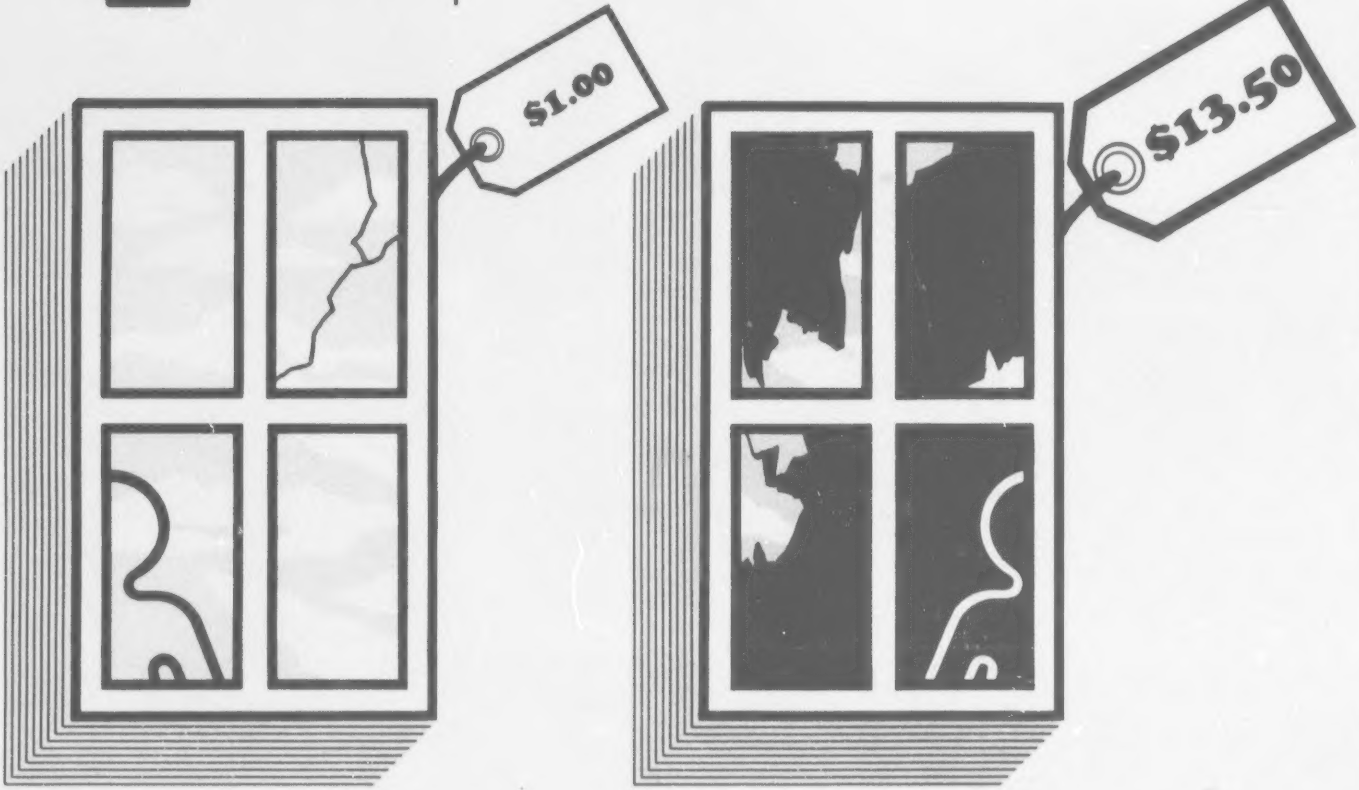


**COMMENT:** Kindergarten is important because it helps identify hearing, vision and other learning problems before first grade and helps children develop language and social skills. Public kindergarten is new in Texas—all five year olds were eligible for the first time in 1973. Enrollment has grown slowly, largely because kindergarten is free for only a half day. Although free full-day kindergarten was to become open to all children by 1977, new state legislation has restricted it so that beginning in 1979 only the very poor and the non-English speaking may attend free for a full day. Other children may have to pay tuition for the remaining half day.

**SOURCE:** Texas Education Agency, Information Analysis and Curriculum Development.

# 46

## Vandalism costs school districts $1 - $13.50 a year per student.



**COMMENT:** Nationwide, vandalism costs over $500 million a year—what it costs to buy textbooks. After large urban districts, large suburban districts are the most likely place for school crime to take place. School buildings, particularly windows, are the most frequent target; theft and burglary, the next. Arson is the most expensive single school crime, causing the cost of vandalism per student to rise to $24 a year. The costs of vandalism usually do not include increased insurance rates or security measures—Dallas, for example, spent more than 2 percent ($684,000) of its budget on security measures in 1974-75. Added to that are hidden costs—loss of a healthy learning environment, and diversion of funds to building upkeep and security.

**SOURCE:** "School Violence, Vandalism and Disruption - A General Outline," Texas Council on Crime and Delinquency; "Violence and Vandalism," National School Public Relations Association.

# 47

# An estimated 4,550 Texas school teachers are assaulted every year.

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**COMMENT:** In the course of a school year, secondary school teachers face the possibility of being stabbed, raped, strangled, or attacked—mostly by students. On a lesser scale, teachers are also regularly assaulted verbally and by gestures—ranging from insult and obscenity to death threats. The actual occurrence of violence may be three times greater than what is reported—teachers are reluctant to report assault, and administrators don't want schools to get a negative reputation. Even though the percentage of assaulted teachers is small (3 percent), the fear of assault can have repercussions on students through distrust, overreaction and loss of control.

**SOURCE:** Texas Parent-Teachers Association; "What the Safe School Study Means to You," *American Educator*, July 1978.

# 48

## In a study of 1,252 children convicted of offenses in Texas, only 4.6 percent were at the proper grade level in school.

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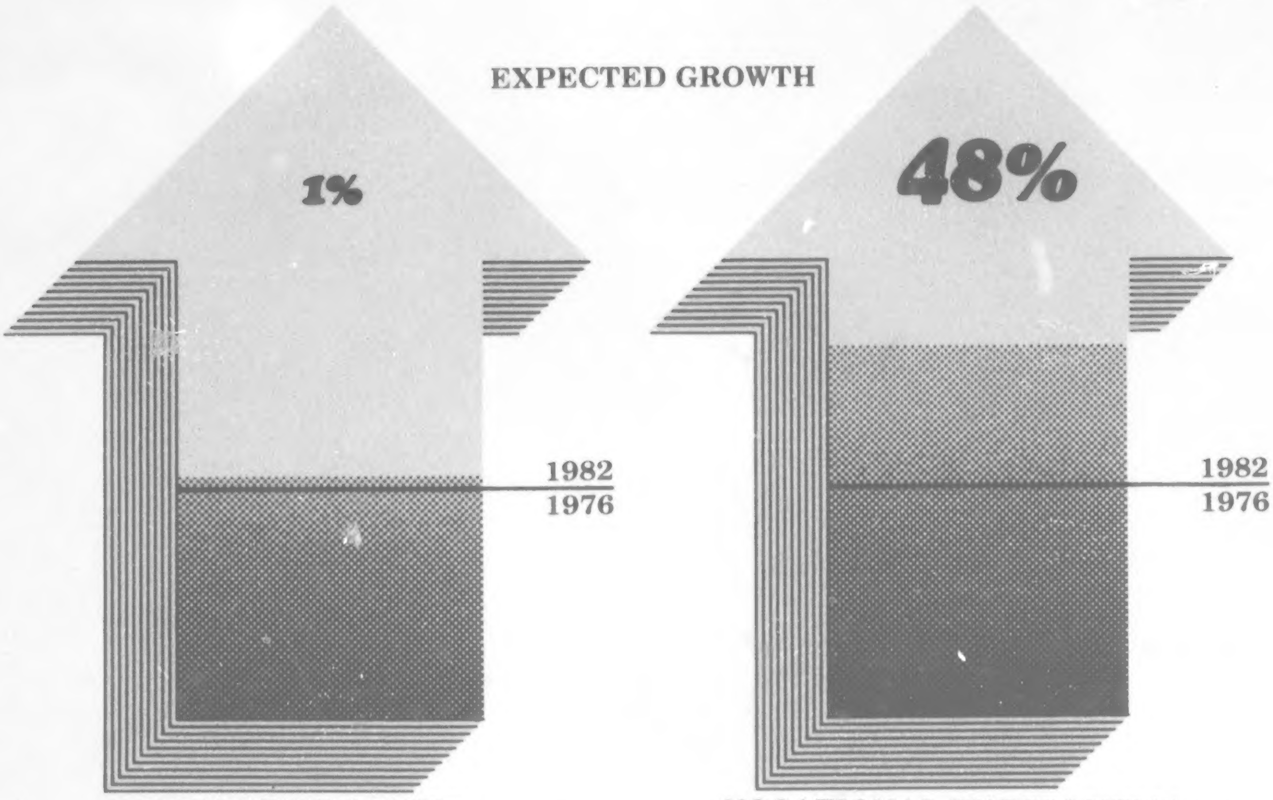
**COMMENT:** Although many causes of crime lie outside the school, the relationship between youth crime and school failure is startling. Some theorize that when youth perform poorly in scholastics, are not popular with classmates and do not excel in any extracurricular activity, they suffer from low self-esteem. They revolt against school by disruptive behavior, truancy, vandalism and violence. A 1978 HEW study found that schools are not helpless victims; they can greatly reduce violence. One strategy is to explore new kinds of learning environments that would minimize competition and give all students a chance to succeed and feel valued.

**SOURCE:** "School Violence, Vandalism and Disruption—A General Outline," Texas Council on Crime and Delinquency.

# 49

**Although enrollment for grades 7-12 will grow by only 1 percent by 1982, students in vocational education programs are expected to increase by 48 percent.**

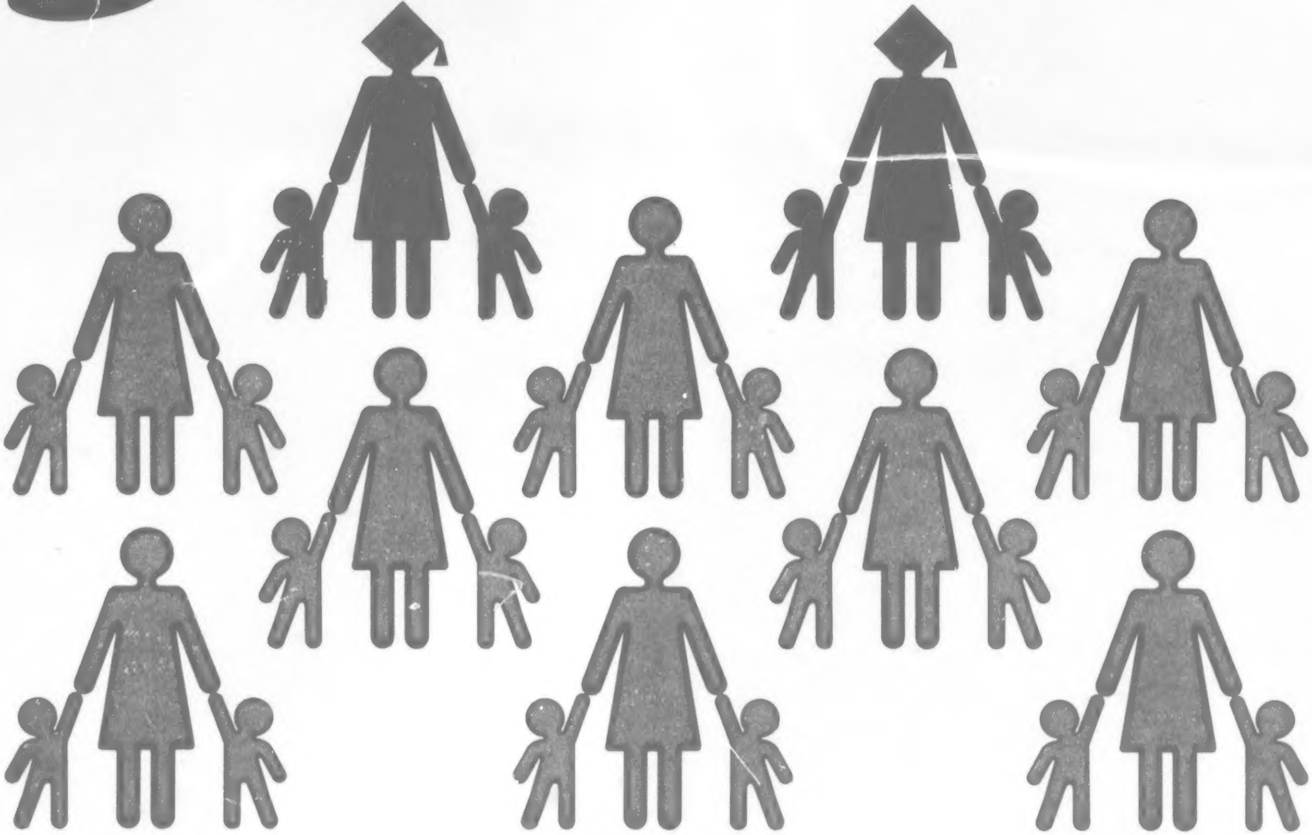


**COMMENT:** One frequent criticism of schools is that they don't adequately prepare some youth to find jobs and deal with the real world. As a result of recent federal legislation, schools are being urged to provide more vocational education programs that will teach youth marketable skills and provide more opportunities for career development. The ability to find a job right out of high school is becoming more important, particularly with the high proportion of teenagers marrying and the number of dropouts who leave school because of pregnancy, economic necessity, or disinterest.

**SOURCE:** Texas Education Agency, Vocational Education Five-Year Plan.

# 50

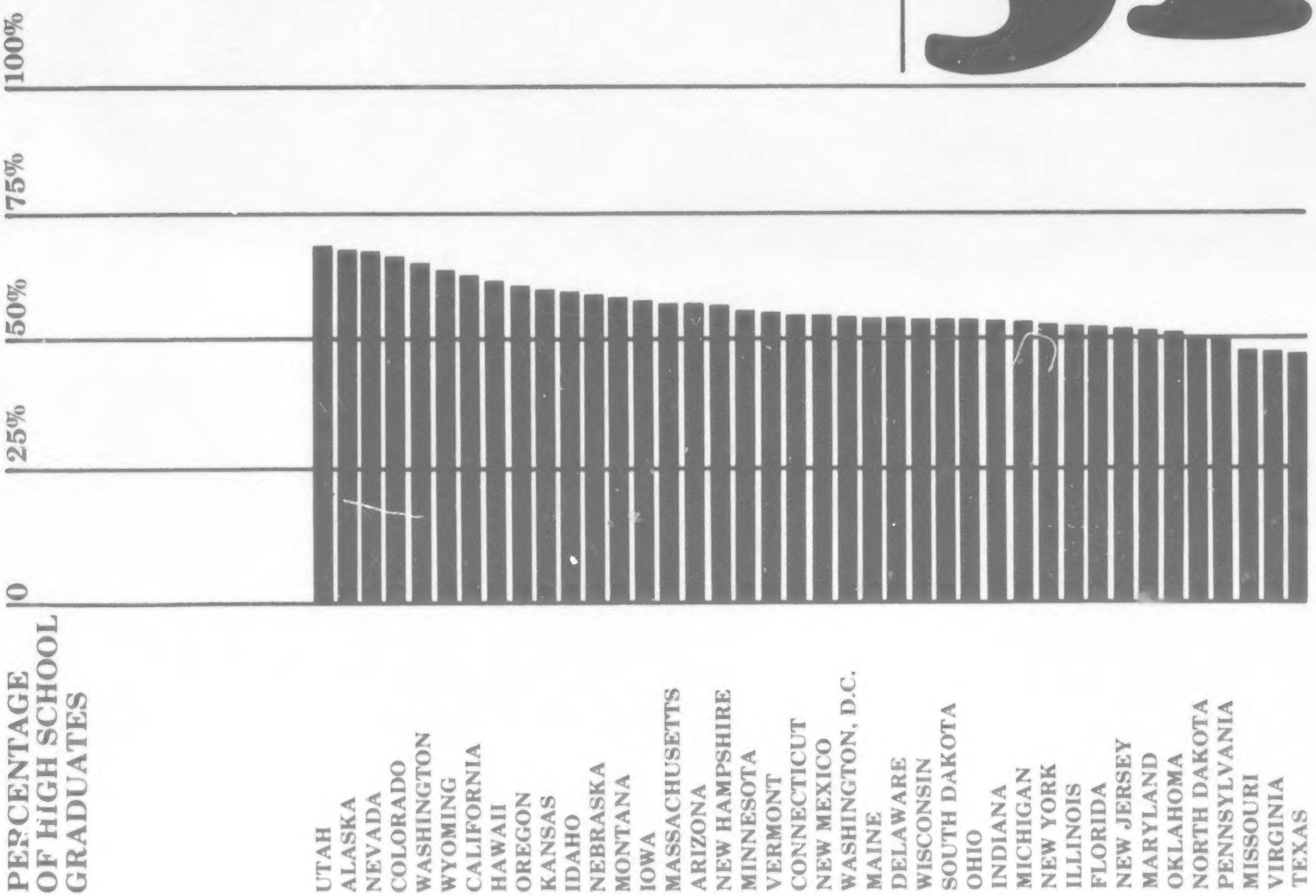
## 8 of 10 women who become mothers at 17 or younger never finish high school.



**COMMENT:** Under Texas educational policies, a pregnant school girl may continue taking regular classes or request special education. Pregnant students served by special education in Texas has quadrupled since 1970—from 1,336 to 5,658, but pregnant students continue to drop out. The exact number is unknown, but it must be considerable because some 45,000 women 19 and under give birth in Texas every year. Many get married and do not return to school because of the obligations of family life. Others might continue school if they could find care for their babies, but only a handful of Texas communities have services for school-age parents.

**SOURCE:** *11 Million Teenagers*, Planned Parenthood Federation of America, 1976; Texas Education Agency, Special Education Department.

# Texas ranks below 39 other states in the proportion of 25-year-olds who have not graduated from high school.



**COMMENT:** The exact number of school dropouts per year in Texas is not known, but estimates are that 7 percent of Texas students in grades 9-12 leave school before graduating. Most dropouts quit school because of marriage or pregnancy, but a significant number also leave to find work. Dropouts have a tough time finding a job—the unemployment rate is double that for high school graduates and more than three times that for college graduates. When job hunting becomes too difficult, some dropouts become discouraged and quit seeking employment altogether. Lack of education and employment have serious implications for parents who must support a family.

**SOURCE:** *Statistical Abstract of the U.S. 1977*; Texas Education Agency, Information Analysis; *Problems of Youth*, Texas Department of Community Affairs, Youth Services Division, May 1978.

EDUCATION

# 52

# The illiteracy rate in Texas is nearly double that of the United States.

## Only three states have a higher proportion of illiterates.

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**COMMENT:** Illiteracy is defined as the inability of persons over age 14 to read or write in any language. Only South Carolina, Mississippi, and Louisiana have higher rates than Texas, according to 1970 data. Functional illiteracy—the inability to cope with routine tasks of daily living, such as writing a letter, reading the want ads, reading a bus schedule, or applying for a Social Security card—may be much higher. One University of Texas study found that 20 percent of American adults are functionally illiterate. And researchers for the Houston Independent School District report that 3 of every 10 junior and senior high school students are functional illiterates.

**SOURCE:** *Statistical Abstract of the U.S. 1976*; Dr. Norvell Northcutt, Southwest Educational Development Laboratory; *Houston Chronicle*, Jan. 22, 1978.

***"And sometimes goin' on in the dark***
***Where there ain't been no light."***

Youth are in that fuzzy world of not being children anymore, but not being adults either. They can get a job; but they cannot work in factories, work more than 8 hours a day, or work night shifts until age 15. Except for certain exemptions, they cannot leave school or get married. They can buy cigarettes at 16 but not alcohol until they are 18. In Texas, the full privileges and obligations of adulthood come at 18.

Some authorities say that today's youth are growing up earlier, wanting more privileges than their parents had. Statistics show that more of them are engaging in sexual activity. Statistics also show that increasing numbers of them are troubled. They are skipping school, dropping out, and committing acts of violence. Drug use is common and apparently contributes to discipline problems at school. Discipline problems arise at home, too. When family disagreements reach the crisis point, many children run away—or their parents kick them out. One runaway house in Houston reported that the majority of children served there are "throwaways" or "pushouts."

Some troubled youth react by turning inward. Dr. Peter Saltzman, Director of McLean Hospital Children's Center in Belmont, Massachusetts says: "Depression is an ailment psychiatry did not recognize in kids until about 10 years ago. Now it's showing up as a symptom in suicides, poor school performance, hyperactivity, hypochondria, fighting and delinquency."

Delinquency is highly publicized and probably occurs more frequently than is reported in official records. The Institute for Juvenile Research suggests that as few as 2-3 percent of delinquent acts result in formal complaints or in police detection. The Texas Council on Crime and Delinquency reports that about 95 percent of those jailed or imprisoned are children of low-income and non-white families—not because they commit more crimes necessarily, but because the juvenile justice system seems to favor the advantaged.

Laws governing youth offenders, ages 10-17, appear in Title 3 of the Texas Family Code. Under this code, a child's unlawful behavior may be termed in one of two ways:
(1) "delinquent conduct," which refers to a felony or misdemeanor punishable by jail or penitentiary sentence (murder, rape, assault, robbery, burglary, etc.) or
(2) "conduct in need of supervision," which includes truancy, running away, driving while intoxicated or under the influence of drugs. Much of the debate in handling juvenile offenders occurs in the second area, in a subset of acts called "status offenses" (acts which would not be unlawful if committed by an adult, such as truancy and running away).

Some say the juvenile courts should leave the problems of status offenders to the community, to be dealt with by the family, schools, mental health groups and social welfare agencies, and that juvenile courts should devote their full energy to youth crime. Texas does not have enough facilities for handling status offenders and children whose conduct is in need of supervision. Unfortunately, too, the Texas Family Code does not clearly assign the responsibility for these children to any state agency or agencies. And sometimes the jurisdiction may overlap. Who, for example, should handle children who are both juvenile offenders and emotionally disturbed?

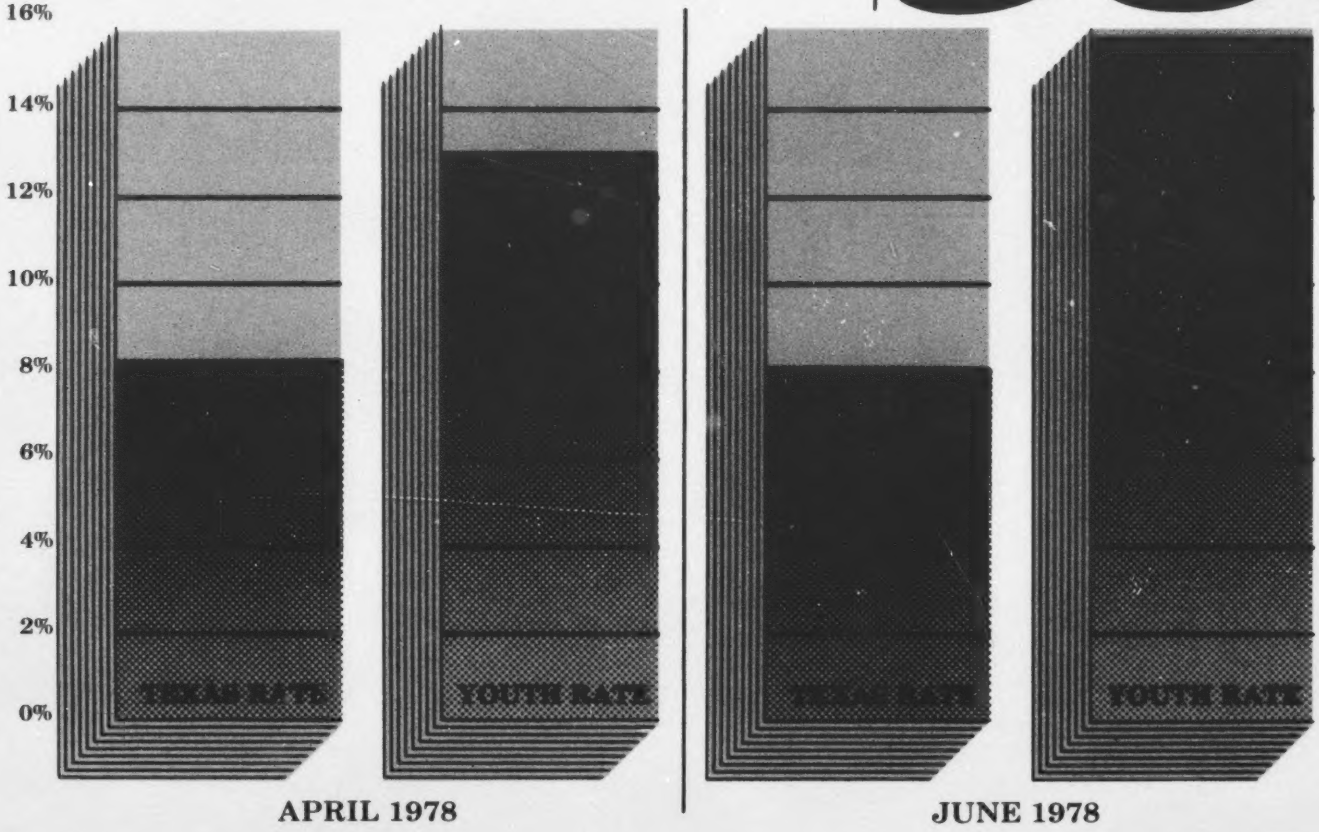
"Parents, teachers, students, and total communities must reach the decision that children's problems are community problems which must be dealt with in a community setting," says the Texas Council on Crime and Delinquency. "Schools must be prepared to provide education, not only for the normal student in a traditional setting, but also for the student who fails or who, because of a learning disability or family problem, is unable to cope."

How do children become adults? The answer may not lie in prolonged schooling, as once believed, but rather in different environments which offer a variety of opportunities for growth and maturity.

## 53

## Unemployment among Texas teenagers 16-19 years old is three times the state unemployment rate

**—and rises even higher in the summer.**



**COMMENT:** The youth unemployment rate is based on the number of young people in or out of schools who are actively searching for part-time or full-time work. They may be seeking extra pocket money or a source of livelihood. Teenagers who enter the highly competitive job market are pitted against older workers with more schooling and job skills. Teenagers are further hampered by not knowing where their real job interests lie or much about job seeking and employment opportunities. Some youth face additional barriers, such as racial discrimination or geographic and cultural isolation. Some employers may be reluctant to hire teenagers because of minimum wage and child labor laws.

**SOURCE:** Texas Employment Commission, Economic Research and Analysis Department, *Problems of Youth*, Youth Services Division, Texas Department of Community Affairs, May 1978.

# 54

## An estimated 15,624 Texas children will run away from home this year.

**13,774 runaways were arrested in 1977—3 of 5 were females.**

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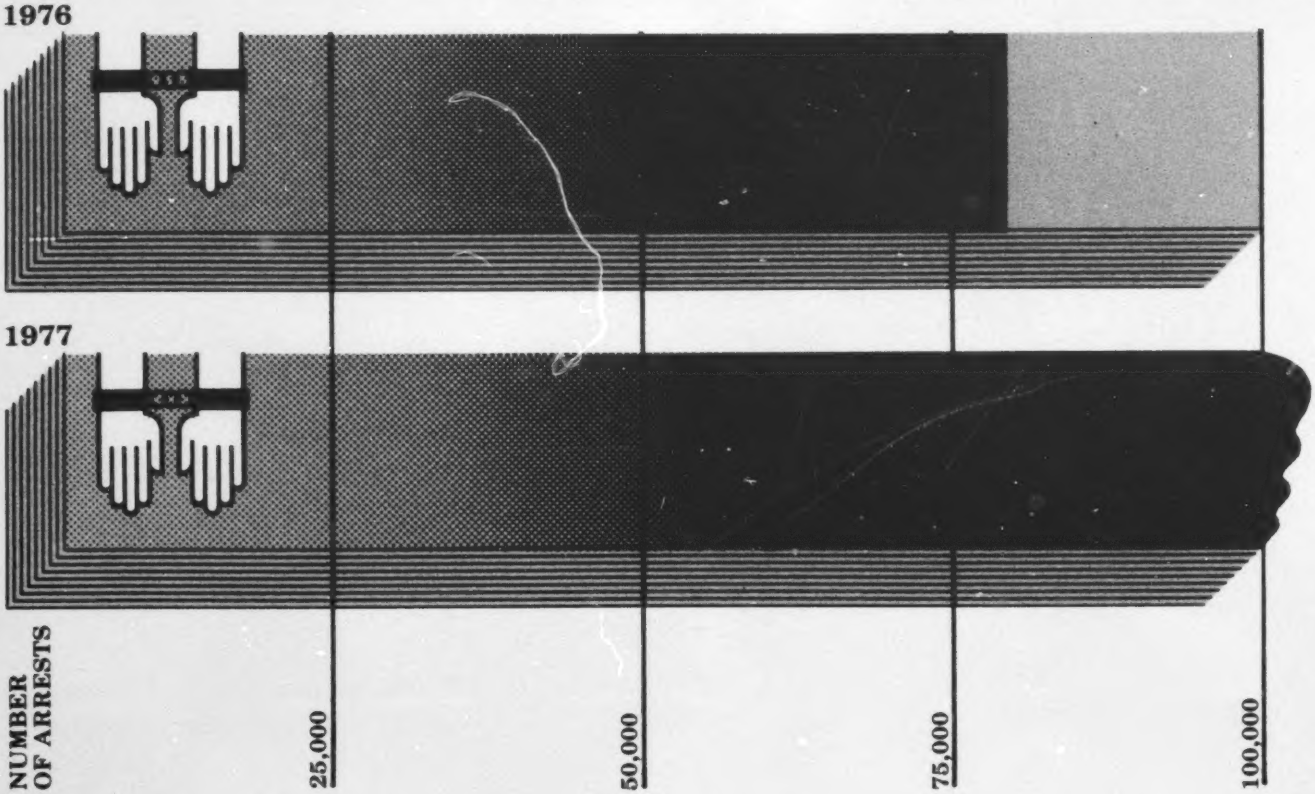
**COMMENT:** The typical runaway is a fourteen-and-a-half-year-old white female who is unhappy at home and in school and frequently at odds with family, teachers and peers. Not all runaways are arrested and returned home. Why do they run? Unlike the flower children of the 1960s who ran away to find a Utopia, many of today's children run away to escape sexual abuse at home or their parents' harsh discipline, excessive drinking or marital problems. In nearly all cases, there is a breakdown in family relationships. Runaways flock to urban areas, haunt places usually catering to teenagers and often exist by prostitution.

**SOURCE:** Department of Public Safety, Uniform Crime Reporting Bureau; "Runaways," *Today's Education*, March-April 1977.

# There were 102,739 arrests of children under 18 in Texas in 1977

**—compared to 79,331 in 1976.**



**COMMENT:** Youth crime is growing faster than the population. Children may be arrested in Texas for conduct that is either delinquent—such as murder, robbery, rape, theft, burglary—or indicating a need for supervision—such as truancy, running away, driving while intoxicated or under the influence of drugs. Depending upon the alleged offense, an arresting officer may let the child go with a warning, release the child to parents, or take the child before the juvenile court or to a detention facility. Only 51 counties have a law enforcement officer assigned full-time to juvenile cases. In addition, there are 142 juvenile probation departments in Texas providing services to 224 counties.

**SOURCE:** *Crime in Texas*, Texas Department of Public Safety, 1976 and 1977; *Texas Juvenile Probation Report*, Office of Court Administration, June 1978.

# 56

## Burglary and theft combined are the most frequent reasons youth are referred to juvenile authorities.

| DELINQUENT | TOTAL | PERCENT |
|---|---|---|
| Homicide | 108 | .2 |
| Rape | 261 | .4 |
| Robbery | 765 | 1.1 |
| Aggravated Assault | 1,233 | 1.7 |
| Burglary | 11,742 | 16.4 |
| Theft | 12,316 | 17.2 |
| Controlled Substance | 4,853 | 6.8 |
| Other Delinquent | 8,766 | 12.2 |
| **CHILDREN IN NEED OF SUPERVISION** | | |
| School Attendance | 4,660 | 6.5 |
| Liquor Law Violation | 3,782 | 5.3 |
| Inhalant | 1,180 | 1.6 |
| Runaway | 12,290 | 17.1 |
| Other | 9,460 | 13.2 |
| **TOTAL** | 71,416 | 97.0 |

**COMMENT:** When the alleged offense is serious enough, a child picked up by police may be referred to juvenile court. Between taking the child into custody (similar to arrest) and the disposition hearing, the court has many options in dealing with the child—including dismissal, family counseling, adjudication (similar to trial), and transfer for trial as an adult. Males accounted for 75 percent (53,480) of all juvenile burglary and theft. How to handle children who commit crimes has been the subject of much controversy. Some authorities believe that the courts cannot effectively deal with problems that stem basically from the family, school and community.

**SOURCE:** *Texas Juvenile Probation Report*, Office of Court Administration, June 1978; "Juvenile Justice," Texas PTA, June 1977.

## 57

**Of the 71,416 referrals to Texas juvenile court authorities in 1977, 44 percent were for conduct indicating a need for supervision.**

**The vast majority of juvenile detention facilities are county jails.**

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**COMMENT:** Children whose conduct indicates a need for supervision should not be kept with criminal offenders. Many of these children are "status offenders"—i.e. they have committed acts which would not be crimes if they were adults, such as truancy or running away. All metropolitan areas of Texas have separate juvenile detention facilities, but 118 less populous counties use a portion of the county jail. About 100 counties have no juvenile detention facilities whatsoever. Youth offenders often have severe behavior problems; some are emotionally disturbed. Authorities say there are not enough diagnostic facilities and treatment alternatives for serving these children in Texas.

**SOURCE:** *Texas Juvenile Probation Report*, Office of Court Administration, June 1978; *Problems of Youth*, Youth Services Division, Texas Department of Community Affairs, May 1978.

# 58

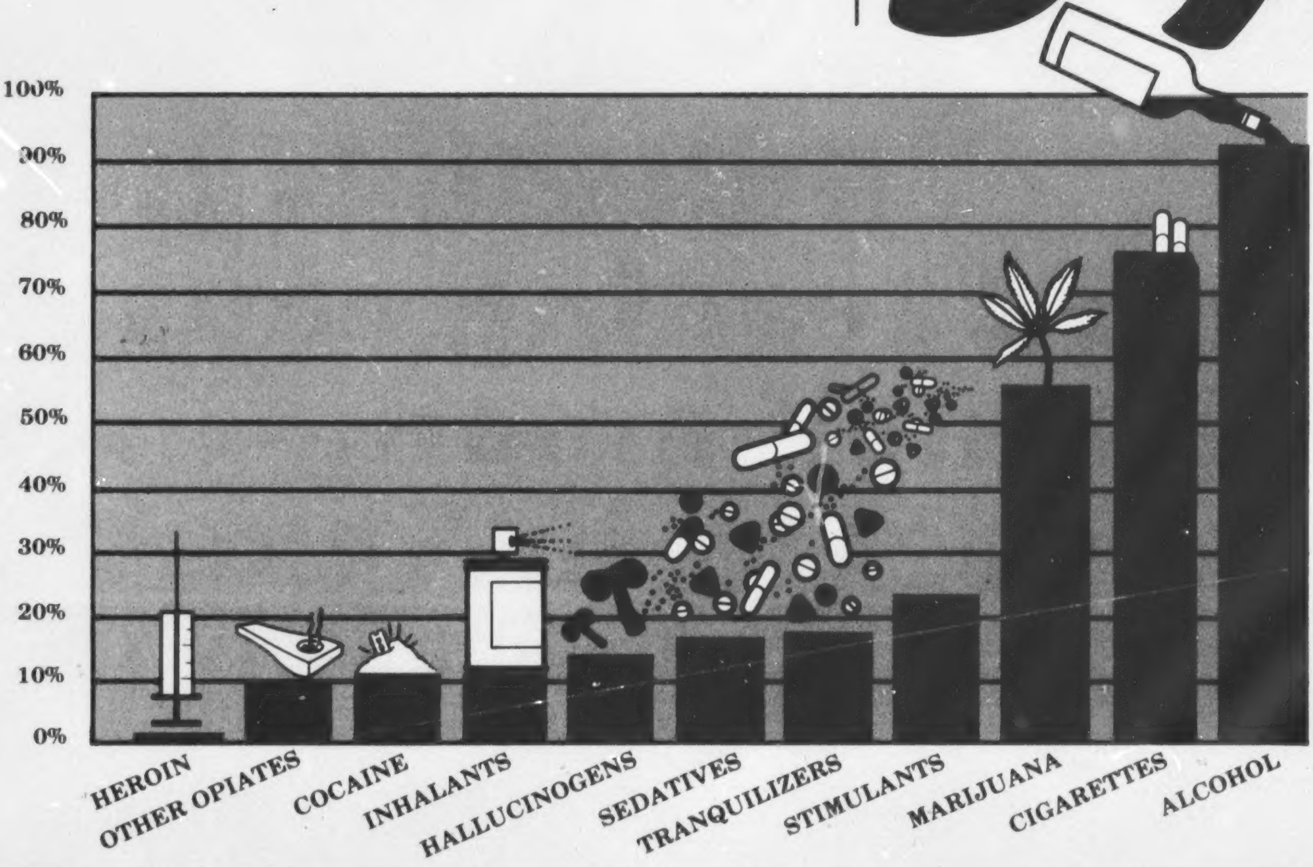
# 18,197 drug arrests in Texas in 1977 were youngsters 18 and under.

## —Marijuana accounted for 90 percent.

**COMMENT:** Authorities are alarmed at the use of illicit drugs (other than alcohol) by teenagers, as perceived by data on arrests (above), drug treatment programs and deaths. Arrests may reflect occasional recreational use of drugs, but admissions to drug treatment programs indicate a physical or emotional dependence. More than 1,900 youth 19 and under were admitted to drug treatment programs in Texas in 1977. Youngsters 14 and under were most likely to report a primary problem with inhalants (61 percent) or marijuana (20 percent). Those 15-19 were as likely to be admitted for inhalants (27 percent), as for marijuana (22 percent) or narcotics (21 percent). Forty-one Texas youngsters 19 and under died from drugs in 1977.

**SOURCE:** Texas Department of Community Affairs, Drug Abuse Prevention Division.

# Alcohol is the most commonly used drug of young people.



**COMMENT:** Most Texas youth begin developing attitudes toward alcohol use long before the legal drinking age of 18—and alcohol may be more accessible and socially accepted than marijuana and other drugs. An estimated 79,700 Texas teenagers have an alcohol abuse problem—defined as psychological or physical dependence. One national study showed that 61 percent of high school students who drink "get drunk" at least once a month.

**SOURCE:** "Highlights from Drug Use Among American High School Students 1975-77," DHEW Publication No. (ADM) 78-621; "Alcoholism Facts," Texas Commission on Alcoholism, 1977.

# 60

# Suicide is the third leading cause of death among teenagers in Texas.

## Suicide incidence in teens 15-19 years old has tripled in 10 years.

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**COMMENT:** The rise in suicides and attempted suicides among youth is attributed to an increase in depressive illness. Once thought to be a mental problem confined largely to older adults, depression is occurring more among teenagers. In fact, the number of suicides may be even greater, because some are recorded as accidental deaths. Most suicides occur at home and result from drug overdose. Although girls are more likely to attempt suicide than boys, boys more often succeed and are more likely to use violent methods. Depression incidence is greatest in late spring and early summer and is often evidenced by apathy, abrupt changes in behavior, declining school performance, family disruption, or preoccupation with death.

**SOURCE:** *Vital Statistics 1977*, Texas Department of Health; *Re: Children*, U.S. Department of Health, Education and Welfare, Dec. 1977.

***"Don't you fall now—***
***For I'se still goin', Honey,"***

Who cares for Texas children besides families? If "child care" is defined broadly to include temporary and 24-hour guardianship and guidance, there are literally thousands of individuals and agencies assisting Texas parents in caring for children. This section considers two types of child care—day care for working or low-income parents, and 24-hour care for children who have been removed from their families for some reason.

Almost all families, regardless of whether both parents work, require child care from time to time. Children need babysitters when parents go out at night or go shopping. Some preschool children need the company of playmates in a nursery school for two or three mornings a week. School-age children may need supervised recreation after school, especially if both parents work. Younger children whose parents work need part or full-time care—in a family day home, a child care center or a nursery school. Cost of such care depends on the type of arrangement, the number of children parents have in care, and the parents' income.

A major development over the last few years has been that supply has caught up with demand, especially in urban areas. The focus of attention now is on quality and variety. Does the facility meet the minimum standards established by the Texas Department of Human Resources? And does it provide for the child's developmental needs? How experienced and knowledgeable are child care personnel? Do parents have a real choice in the care they choose—family versus center care, care consistent with their culture and values, care they can afford, care within easy access of home or work? Is infant care of high quality? Is there appropriate care for handicapped children? The answers are beyond the scope of present statistics; these issues are only beginning to be explored.

Similar questions about quality and variety are being asked about child care for children who have been removed from their families. These are foster children or juvenile offenders. Foster children are innocent victims of circumstances beyond their control—parents' abuse and neglect, sudden death, physical or mental illness, marital conflicts, alcoholism, drug addiction or retardation. In Texas at least 131 county child welfare boards, covering about 89 percent of the state's child population, provide foster care services.

The social welfare staffs in these counties investigate reports of child abuse, arrange foster care, counsel the natural parents to help restore a safe and stable home environment, and arrange for adoption if necessary. Heavy caseloads often leave little time for recruiting and screening new foster homes or for training foster parents.

Foster children have special needs. Many have emotional and behavior problems because they come from homes torn by abuse or other problems; some are handicapped. According to national estimates, 50-85 percent of children in foster family care will continue to grow up in a foster family—but not the same one necessarily. On the average, a foster child moves 2-3 times from one home to another. And less than 10 percent of children in foster family care are being freed for adoption.

Unlike foster children, juvenile offenders may be removed from their families by their own law violations. Of course very few children who come in contact with the juvenile justice system are ever removed from their families; many are released to the custody of their parents. Those who have been found by the court to be delinquent or in need of supervision may be placed on probation with their families or in foster homes and agencies. Those found delinquent may be sent to Texas Youth Council training schools. In rare cases, older youth who have committed a felony may be transferred for trial as an adult, and if found guilty may be sent to the Texas Department of Corrections with adult criminals.

In recent years, there has been a trend to divert delinquent youth away from commitment to large institutions and toward community-based programs. Not all youth placed on probation can remain at home because they need a more structured environment or because their parents are either unable or unwilling to cope with them. In addition, there is evidence that youth on probation have a lower level of learning skills, have difficulty in interpersonal relationships and cannot plan recreation and work activities.

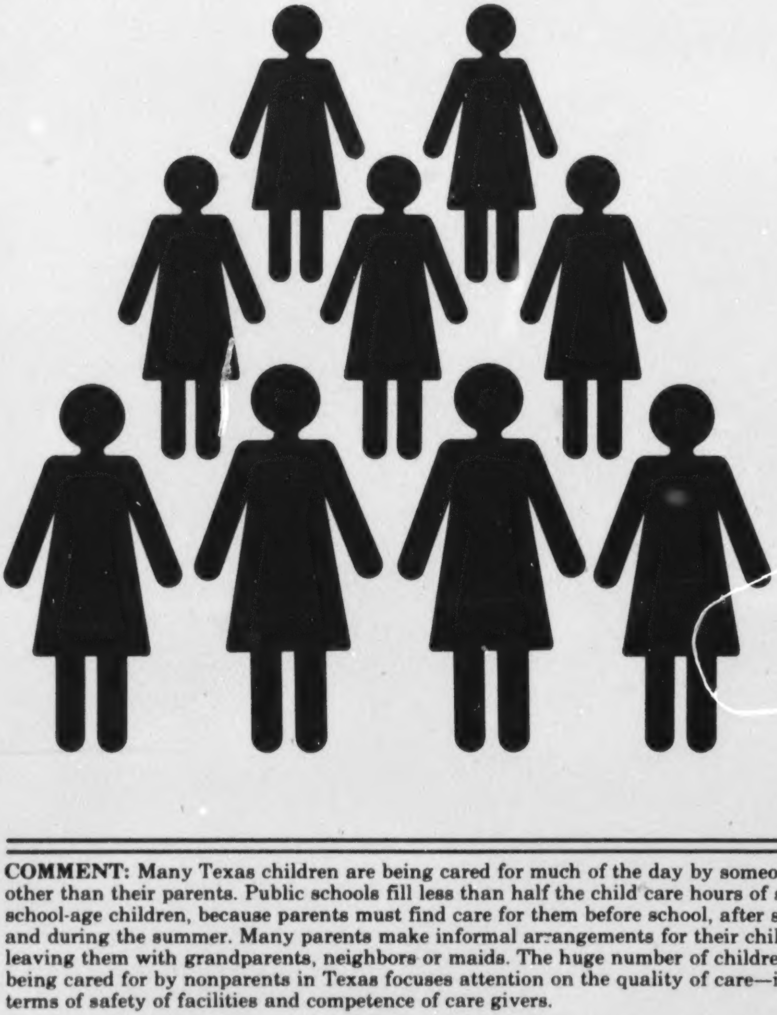
The Texas Department of Community Affairs Youth Services Division has pointed out the need for alternatives to the judicial process for youth who commit first offenses and offenses which are not against persons. These alternatives include individualized treatment, vocational education, family crisis counseling, and if necessary, emergency out-of-home care. There is also a need for alternatives to incarceration—especially for children in need of supervision—such as small group homes, foster care and forestry and camping programs.

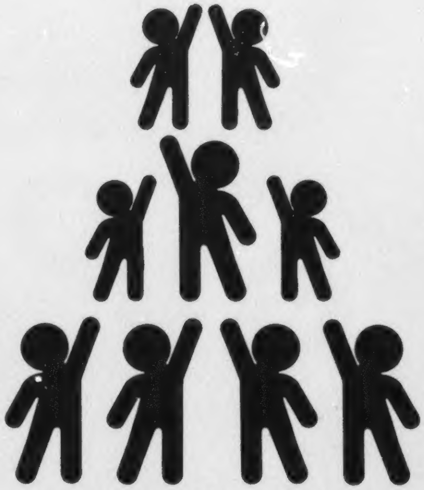
Any system of child care must work toward the dual goals of the best interest of the child and the best interest of the family. Whether child care is for working parents or for families in crisis, the criteria should be appropriateness for meeting the individual child's needs, trained and caring personnel, and active support of the family by the community.

# Texas has 900,000 children 0-14 whose mothers work.

### About half are under age 6.

61





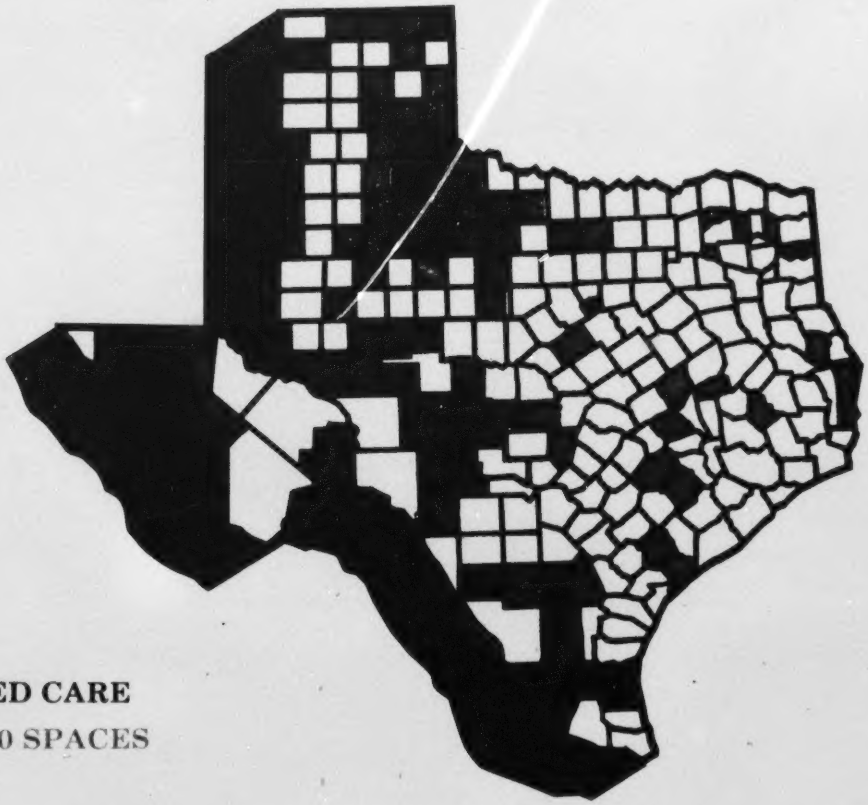
**COMMENT:** Many Texas children are being cared for much of the day by someone other than their parents. Public schools fill less than half the child care hours of school-school-age children, because parents must find care for them before school, after school and during the summer. Many parents make informal arrangements for their children, leaving them with grandparents, neighbors or maids. The huge number of children being cared for by nonparents in Texas focuses attention on the quality of care—in terms of safety of facilities and competence of care givers.

**SOURCE:** *Texans and Human Services*, May 1977, and Licensing Division, Texas Department of Human Resources.

# 62

## In 96 Texas counties, state-regulated day care serves fewer than 100 children in each county.

**In 22 counties, there is no regulated care.**



**NO REGULATED CARE**

LESS THAN 100 SPACES

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**COMMENT:** State regulation means that facilities have met minimum standards for care, such as fire and health inspections. The figures above include both licensed day care centers and registered family day homes. In the 22 counties with no regulated care, there are an estimated 2600 children under age 6 whose mothers are in the labor force. Rural families may have a problem finding minimal quality care for their children. Unless they have neighbors or relatives willing to provide care, parents may be forced to use unregulated care or leave their children alone at home. Most metropolitan areas have enough regulated care, but even so, some families must drive 20-30 miles for minimal quality care.

**SOURCE:** Texas Department of Human Resources, Licensing Division.

# 63

# 113,441 poor children in Texas are missing the services of Head Start.

## Only 15 percent of eligible children are being served.

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**COMMENT:** Head Start is not available in 129 Texas counties. The program provides comprehensive services (medical, dental, nutritional, psychological and educational) to poor children 3 to 5 years old at a critical time in their development. Without such services, handicaps may go unrecognized and children may fall behind their peers in school, leaving them with the same fate of their parents—low educational attainment, poor job skills, and despair.

**SOURCE:** U.S. Department of Health Education and Welfare, Regional Office of Human Development Services, Administration for Children, Youth and Families, 1977.

# 64

## An estimated 30,900 Texas children under six may be left to care for themselves while their parents work.

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**COMMENT:** Preschool children who are left unattended are at great risk for physical and emotional security. They may be locked in the house, food within easy reach and only the television set for company, or they may roam the streets and neighborhood. Five-year-olds may be made responsible for younger children and infants. Aside from children left unattended, there may be an equally large number of children receiving care of questionable quality—children left with a parent who works the night shift and therefore sleeps most of the day, or with a disabled relative.

**SOURCE:** 1973 Texas Household Survey of Families with Children under Six, projections on 1978 population data.

# 65

## An average 4,505 children are in the care of state-sponsored foster families in Texas every month.

**—Another 317 children are in foster group homes and 1,875 in institutions.**

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**COMMENT:** Not included above are children placed in foster care through the private child care sector. Foster children are caught in circumstances their parents cannot cope with; many are victims of abuse or neglect. Foster homes provide 24-hour care until parents can resume care, or until the child is adopted or reaches adulthood. Because of the trauma their families have suffered, foster children are likely to have emotional problems and difficulty in school. The stress on foster parents is heavy, especially if they are not trained to deal with such problems.

**SOURCE:** Texas Department of Human Resources, Social Services Management Systems; Foster Care DHEW Publication No. (OHD) 76-30068.

# 66

# 1,200 Texas children 10-18 years old are in Texas Youth Council training schools.

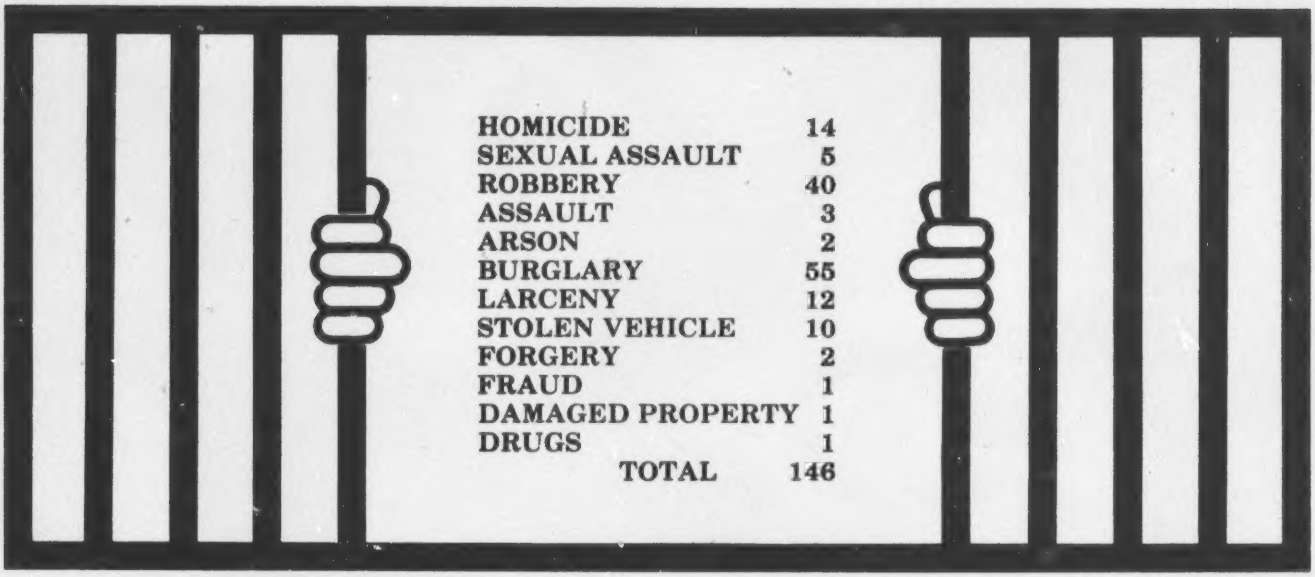
## Another 1,885 are in community service programs and on parole.

**COMMENT:** Children in Texas Youth Council facilities have committed serious offenses or have violated earlier probation. Nine of ten are males, and most are admitted for some form of stealing. The average time spent in a training school is eight and one-half months. In 1976 TYC began a new program aimed at keeping youthful offenders and pre-delinquents in the community. Not counted above are some 5,800 cases of youth found delinquent or in need of supervision by the court in 1977 who were granted probation and are being supervised by a juvenile probation officer in their county.

**SOURCE:** Texas Youth Council; *Texas Juvenile Probation Report*, Office of Court Administration, June 1978.

# 146 Texas 16 and 17 year olds are in Texas Department of Correction facilities.

## 67



| | |
|---|---|
| HOMICIDE | 14 |
| SEXUAL ASSAULT | 5 |
| ROBBERY | 40 |
| ASSAULT | 3 |
| ARSON | 2 |
| BURGLARY | 55 |
| LARCENY | 12 |
| STOLEN VEHICLE | 10 |
| FORGERY | 2 |
| FRAUD | 1 |
| DAMAGED PROPERTY | 1 |
| DRUGS | 1 |
| TOTAL | 146 |

**COMMENT:** In rare cases, the juvenile courts may find that the seriousness of the offense or the background of the child warrants transferring the youthful offender from the juvenile court to a district or criminal district court for trial as an adult. If found guilty, children may be sent to the penitentiary. Most youth inmates (143) are males; usually they have committed some form of theft. None has gone beyond the ninth grade in school (85 percent only 6th grade and below); and most list low-level occupational skills, such as laborer.

**SOURCE:** Texas Department of Corrections, July 31, 1978.

***"Don't you set down on the steps***
***'Cause you find it's kinder hard."***

Behind the closed doors and drawn blinds in some Texas homes is a gruesome problem—abuse. No one knows for sure how many children are abused—probably many more than the official validated reports would suggest. Reports of children caged and starved, infants near death from being beaten, toddlers scalded and battered have increased enormously in Texas since the early 1970s, due largely to a vigorous public information campaign and an intensified state reporting system.

Physical abuse can occur among any socio-economic group, culture or religious affiliation. Generally the abusers are parents and the incidents are chronic. In many instances, the abusive parents were themselves abused as children. Abusive parents are generally isolated; there is no one to turn to for relief from everyday frustrations. In many cases, parents lack information about child development—they don't know what a child can reasonably be expected to do at certain ages. The tendency to abuse children is increased by such problems as unemployment, low self-esteem, marital conflicts, drug abuse and alcoholism.

Physical abuse and neglect affects children of all ages, but the consequences appear to be more devastating for the very young. More than half of all deaths from physical abuse occur in the under 2 age group. One study found that if a child remains with the parents through two court hearings for abuse or neglect, the child will seldom survive to be the subject of a third hearing. Aside from risk of death and physical injury, physically abused children tend to be depressive, hyperactive, destructive, fearful and withdrawn.

A significant proportion of child abuse cases (perhaps as much as 12 percent, according to one national report) involve sexual abuse. Typically the sexually abused child is a junior high school girl victimized by someone in her own home—a father, stepfather, uncle, or some other trusted authority figure. Incestuous relationships, described by some social welfare workers as the "last frontier of child abuse," can last for years and never be reported. Equally as hidden are homosexual attacks on young boys.

Child molesters and sex offenders appear somewhat more stable than physically abusive parents. They are usually married, and some have many children. Studies have shown, however, that they are ineffectual adults who usually drink heavily, are preoccupied with matters of sex and are at home with children during periods of unemployment, while the wife is away at work. Sexually abused children often suffer psychiatric illness and are more prone to poor marital adjustment and crime later on.

Many children who run away from home are victims of physical or sexual abuse. And when they run away, they survive by taking odd jobs, dealing in dope, stealing, or allowing themselves to be exploited in pornographic materials or as prostitutes. The *Readers Digest* reported that runaways "become prime targets for procurers and pimps who routinely haunt railroad and bus stations." One Washington, D.C. study found that 7 of 10 runaway girls become involved in some form of prostitution.

Texas seems to be a big attraction for runaways. The warm climate, the "boom" nature of its larger cities, the easy access to the border and drugs enliven the state's appeal for youth. Some believe that Texas is becoming an important center for child pornography in the United States.

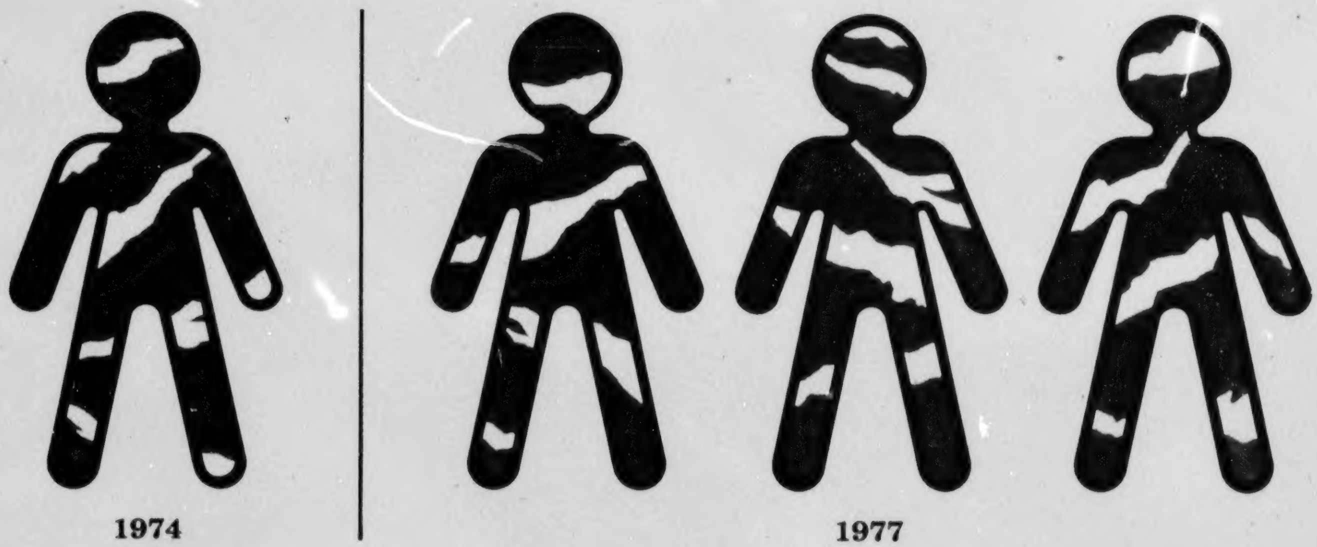
What to do about abused and exploited children is a vastly complex and emotionally charged problem. The first task is to bring the children out of hiding and the problem into public view. Even though Texas has a law requiring anyone who suspects child abuse to report it, many prefer to look the other way when it happens, or don't know what the symptoms of abuse and neglect are. Few Texas communities have emergency shelters or runaway houses, and there is a constant need for foster homes, trained, caring foster parents, and adoptive homes.

The second task is to restore the family. Communities need programs to help abusive parents cope with problems—to come out of hiding, prevent problems, and learn how children grow and develop. Programs to combat alcoholism or drug dependency can also be beneficial.

Just as important as the rehabilitation of abusive parents is the long-range prevention of abuse in society as a whole. Parents and prospective parents, even as young as junior high school age, need opportunities for learning about family life, child development, and parent-child relationships. In addition, communities need to examine the conditions in which families are forced to live—unemployment, isolation, rapid change, higher living costs—as well as prevailing attitudes toward sex and violence. Improving these conditions will require the combined efforts of private business, community organizations, churches, schools and state and local government.

## Confirmed cases of child abuse and neglect in Texas tripled in three years

**—from 3,764 in 1974 to 14,685 in 1977.**



**COMMENT:** A child abuse case usually involves more than one child in a family. The 14,685 confirmed cases in 1977 actually represent 29,696 children. Of those, 120 children died. Much of the increase is undoubtedly due to improved reporting and a major effort by the Texas Department of Human Resources to increase public awareness. However, many experts believe that reported cases are just the tip of the iceberg, with actual abuse and neglect more prevalent than it appears. Even though Texas law requires the reporting of suspected abuse and neglect, many teachers and doctors are reluctant to rock the boat, and many neighbors believe they shouldn't get involved in the affairs of other families.

**SOURCE:** Texas Department of Human Resources, Social Services Management System.

# 69

## 13 percent of all victims of child abuse and neglect are infants.

**One-third are age 6 and younger.**

**COMMENT:** A significant proportion of the victims of child abuse and neglect are the most helpless. Many abusive parents don't know enough about child development to know what they can reasonably expect an infant or toddler to be able to do, such as in potty training. In some cases, parents were deprived of nurturing themselves as children and turn to their offspring to satisfy their needs. When the children are unable to do so, and in fact demand more nurturing from the parents, violence can result. Abusive parents come from all socio-economic backgrounds; they cannot handle stress and frequently are isolated from other families.

**SOURCE:** Texas Department of Human Resources, Social Services Management System; and "Child Beaters Confused," Austin *American-Statesman*, April 23, 1978.

# 70

# Confirmed reports of sexually abused children in Texas nearly doubled in one year

**—from 630 victims in 1976 to 1153 in 1977.**

**COMMENT:** Sexual abuse includes fondling, intercourse and other sex acts with children. Experts believe that most sexual abuse goes unreported and many cases involve incest. Frequently fathers or stepfathers are the abusers. How soon incestuous relationships start is unknown, although some victims report age 6 as the first incident. Some 15 percent of the 1977 sexually abused victims were 0-6 years old, but the largest proportion (61 percent) were in their preteens, 7-14 years old. Incest is such a taboo topic that children and witnesses are hesitant to report it; consequently, few incest cases are ever prosecuted.

**SOURCE:** Texas Department of Human Resources, Social Services Management System; "Incest rarely prosecuted, often unreported," *Beaumont Enterprise*, Nov. 4, 1977.

# 71

## Confirmed reports of sexually exploited children in Texas rose 18 percent in one year.

**COMMENT:** Sexual exploitation refers to selling the services of children for pornography and prostitution. The practice may be on the increase in Texas, rising from 61 victims in 1976 to 72 victims in 1977. Observers suspect there may be some link between children who are sexually abused at home and those who turn to prostitution and pornography later. Many runaways leave home to escape abuse, and once on their own, are forced into prostitution and pornography for survival.

**SOURCE:** Texas Department of Human Resources, Social Services Management System; *Readers Digest*, May 1978; *U.S. News and World Report*, June 13, 1977.

# Texas is one of two major distribution centers for child pornography in the United States.

**72**

LOS ANGELES
HOUSTON

**COMMENT:** Houston is vying with Los Angeles as the number one distribution center in the nation for pornographic materials displaying children, according to author Robin Lloyd. Though California probably produces more pornographic materials, Houston is distributing large amounts because of its rapid urban growth. Statewide, child pornography is a $15 million a year business. The vast majority of children recruited for pornography are runaways, although there are cases where parents sell or rent their children to pornography producers. The average age of child prostitutes or children used in pornography is 13, but some are as young as 6.

**SOURCE:** From newsclippings, testimony before Texas House Select Committee on Child Pornography, Austin, Sept. 1977.

***"I'se still climbin'***
***And life for me ain't been no***
***crystal stair."***

One of every 9 children in the United States lives in Texas. Texas is not only larger and more populated than most states, but its people are relatively young. Five million of the 12 million people who live in Texas are 0-18 years old. And while the birth rate has remained fairly constant in recent years, the absolute number of children born in a year has been increasing slightly and will likely continue as the post-war babies come into child bearing age.

Yet children are a low priority in Texas. Local, state and federal funding does not provide adequate services for the major problems of children and youth. In many programs, there are no funds available for special problems, no long term continuity of funding from state or federal sources, and often no local funds for match of programs which do exist. As a result, Texas ranks low compared to other states in some of the services it provides. Even in education, which takes half of the state's legislative appropriation, Texas ranks 39th in per pupil expenditures and 40th in the proportion of adults who have not graduated from high school.

Some Texans feel strongly about the privacy of family life and resist services and intervention by government or outside groups. What can be overlooked, however, is the role that government can have in strengthening families. Government is already heavily involved in family life through water safety, sanitation, building codes, fire and police protection, zoning, public schools, and so on. Indeed most government policies and programs—whether it be economic stability, unemployment, energy, or environment—have a bearing on family life. Because they do, family impact statements need to be developed on all legislation. There should be—at all levels of government—a clearly defined policy on children and families.

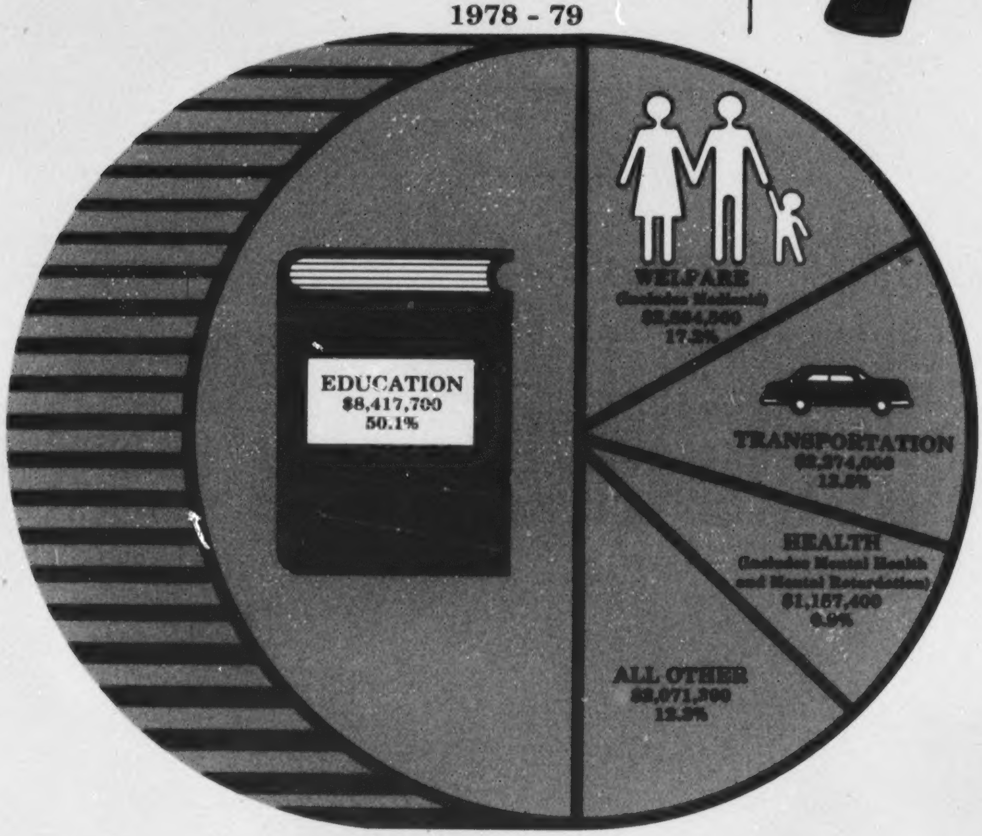
Such a policy could focus on prevention, instead of crisis intervention, as the mode for solving problems. It could also help agencies and organizations coordinate their services to children and youth more effectively. The roles of local, state and federal government could be more clearly defined, with communities determining their own priorities based on the needs of children and families in their regions.

A community-based approach could improve services to children in rural areas and answer specific questions, such as how to work with teenagers regarding parenting. When service responsibilities overlap, as in the case of emotionally disturbed children who are found delinquent, agencies might have better ways of working together. When gaps in programs keep children from receiving services, as in the case of near-poor children who are not eligible for services under the Aid to Families with Dependent Children Program, agencies might find ways to reach them while prevention of future problems is still possible.

In the final analysis, the problems of families and children are the problems of society. Overcoming the problems of Texas requires attacking the problems that weigh on children and families. Government can continue to provide institutions for the blind, the deaf, the retarded, the insane, the delinquent, and the criminal, but it can also shift its priorities in a more positive direction toward the well-being of children and the integrity of families. The goal is not for government to give children and families all the services they need, but to better enable families themselves to provide services they want for their children.

# Half of Texas state government appropriations goes for education.

## 73



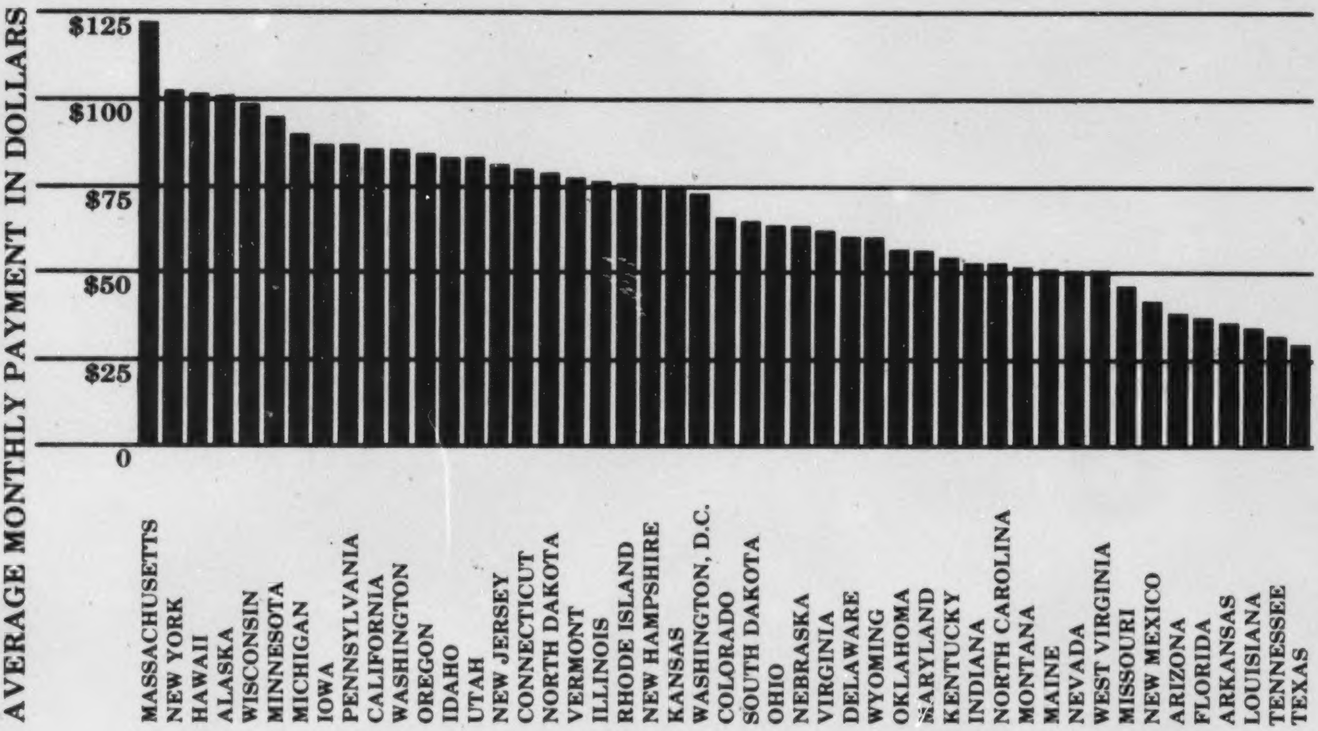
**COMMENT:** Education has taken a larger share of state appropriations in the last ten years, with health and welfare staying at roughly the same proportion. Of the $8 million appropriated for the 1978-79 biennium, $5 million was for public schools and $3 million for higher education and teacher retirement. Financing for Texas public schools comes from three sources: federal (10.4 percent), state (50.1 percent) and local (39.5 percent). In the rest of the U.S., local sources provide more than 48 percent of the revenues. And despite the efforts of the Legislature to increase state aid to school districts, Texas ranks 39th in the U.S. in estimated per pupil expenditures. In 1975-76, Texas spent $1,300 per pupil in average daily attendance compared to $1,581 for the U.S.

**SOURCE:** *Fiscal Size Up: Texas State Services, 1978-79 Biennium*, Legislative Budget Office.

# 74

## Dependent families receive less public financial support in Texas than they would in 46 other states

**—and their payments continue to drop.**



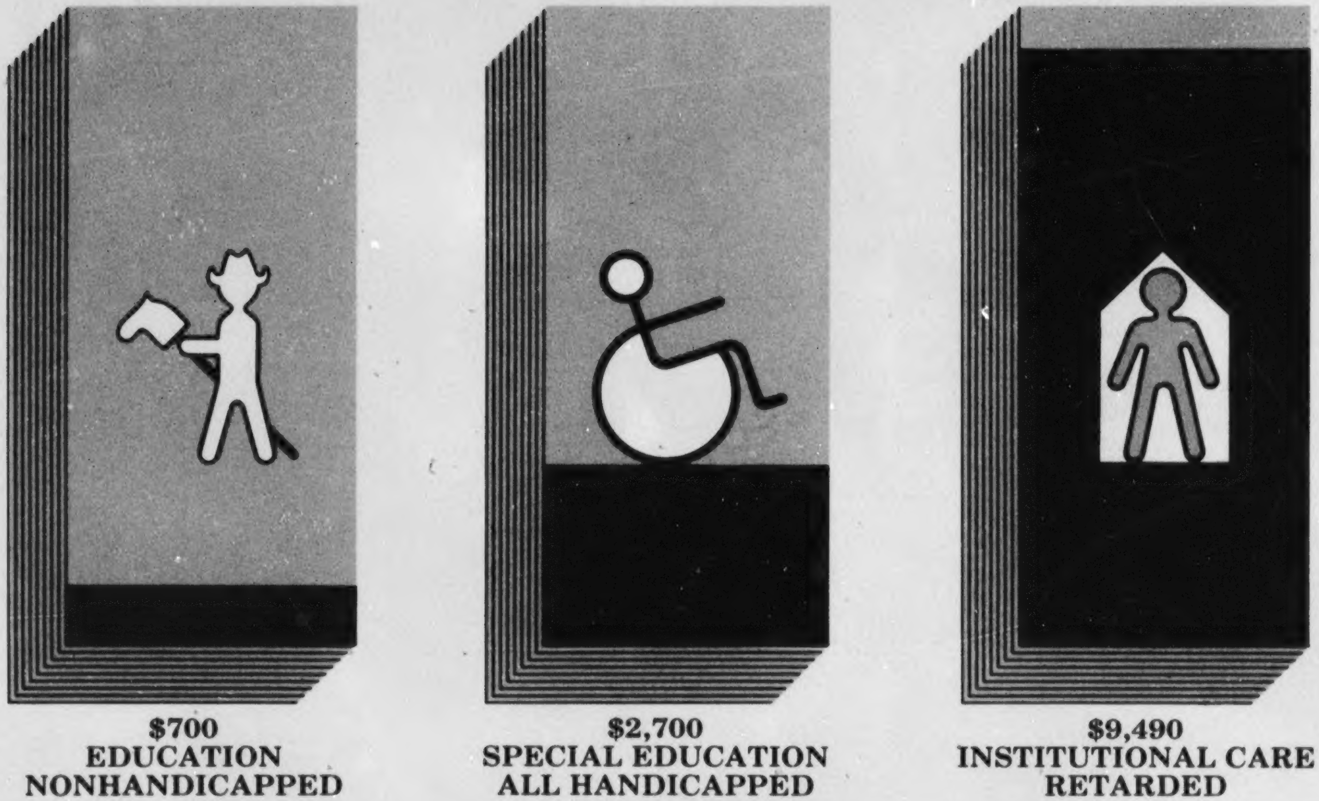
**COMMENT:** Dependent children are those deprived of normal support because of death, absence or disability of at least one parent. Such children and their families are eligible for public payments through the Aid to Families with Dependent Children (AFDC) program. Today the average AFDC recipient in Texas receives $32.13 per month. In two years, Texas dropped from 43rd to 47th in ranking among the states in average payments to welfare recipients. In 1976, the average grant per family in Texas was $108 a month; in 1977, $106—during the same period inflation rose 6.5 percent. One reason is that the number of welfare recipients is increasing but public funding is not.

**SOURCE:** *Statistical Abstract of the U.S. 1976*; *Public Assistance Statistics*, 1974; U.S. Department of Labor, Bureau of Labor Statistics.

# The average yearly cost of educating a handicapped child in Texas is roughly 4 times that of a normal child.

**If the child is retarded and placed in an institution, the cost is 13 times greater.**

# 75



**COMMENT:** Preventing handicaps in children saves the state money in yearly educational and institutional care costs, not to mention lost earning potential and the human misery of lifelong impairments. At best, handicaps should be prevented altogether, or at least identified early so that treatment and training can help the child lead as normal a life as possible. Special education programs serve children 3-21, ranging in costs from a low of $145 for a speech-impaired child to a high of $34,000 per year for an emotionally disturbed child. Without special education, some retarded children might be placed in institutional care.

**SOURCE:** Texas Education Agency, Special Education Department; Texas Department of Mental Health and Mental Retardation, Standards Compliance and Quality Assurance.

# 76

# The average yearly cost per child in subsidized adoption in Texas is only one-third that of foster family care.

**COMMENT:** In Texas, a foster family receives about $5.00 per day per child to provide temporary protection until the child can be placed in a stable and safe family situation, either by returning the child home or by finding a permanent adoptive family. Many foster children are available for adoption, but because of their age, handicap, behavior problem or some other reason, few families are willing to adopt them. Those families who are may not be able to afford adoption fees and the living expenses of another child. Texas will provide a monthly subsidy to adoptive families, but only for poor children eligible under the AFDC Foster Care program.

**SOURCE:** Texas Department of Human Resources, Child Protective Services.

# 77

## In 1977 the average daily cost for treating an emotionally disturbed child was 40 percent more than the state would pay.

10
THE UNITED STATES OF AMERICA
36PT./M15036

MAXIMUM STATE PAYMENT PER DAY

**vs.**

| NONPROFIT RESIDENTIAL TREATMENT CENTER | | |
|---|---|---|
| Average cost per day | $42 | 00 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| **TOTAL** | $42 | 00 |

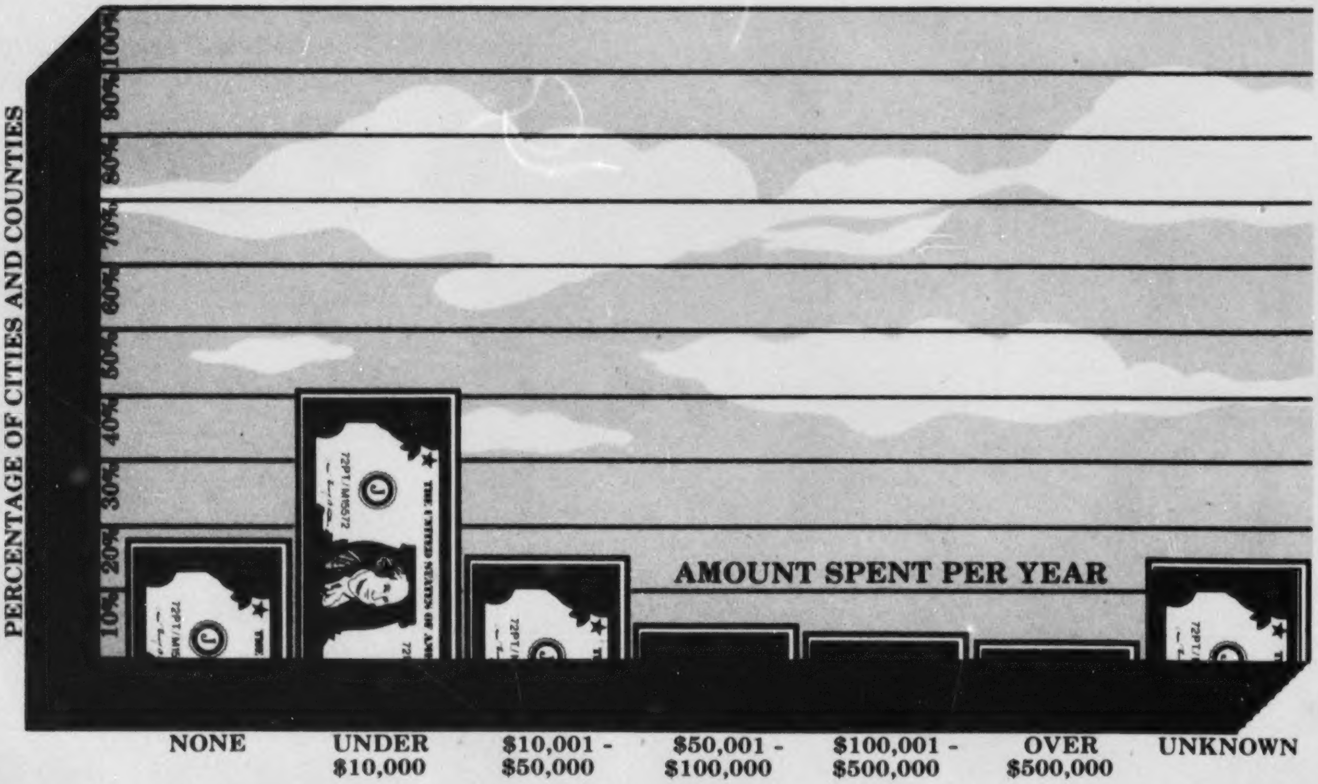
**COMMENT:** Many foster children who are in the custody of the state are emotionally disturbed because of the trauma they have suffered in their families. If they are eligible under the AFDC Foster Care program, the state pays for care in nonprofit residential treatment centers. Treatment care for emotionally disturbed children is expensive. In 1977 the state paid for care up to $30 per day, but the average cost to the treatment center was much higher. Many emotionally disturbed children in the custody of the state are not eligible for AFDC Foster Care. Consequently, they have to rely on local (county) support or free services, which are usually not available at all.

**SOURCE:** Texas Department of Human Resources, Child Protective Services.

# 78

## Texas cities and counties greatly affect the lives of families and children

—a fact not reflected in their budgets.



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**COMMENT:** Most Texas cities and counties (59 percent of those surveyed) spend nothing or less than $10,000 a year on children's services. Historically, communities have relied on federal and state governments and private organizations to support such services. In addition, local officials are not always aware of children's needs and often do not have adequate resources to meet identified needs. However, local governments do affect how families live and rear their children, through ordinances and services, such as fire and police protection, water, sanitation, parks, health, housing and transportation. Local governments are beginning to examine their policies and programs as they impact children, but to date funding remains a low priority.

**SOURCE:** *Local Government Survey*, Texas Department of Community Affairs, Early Childhood Development Division and Texas Municipal League, April, 1977.

# SOURCES

## AGENCIES AND ORGANIZATIONS

Burditt, Tom C., Jr., "Sexual Abuse of Children and Adolescents." Report prepared for Texas House Committee on Child Pornography, Houston, May 5, 1978.

Bureau of Business Research, University of Texas at Austin (from Consumer Price Index information 1970-78, U.S. Department of Labor), Austin, July 1978.

Campbell, William, Dr., Texas Fathers for Equal Rights, Austin, June 1978.

Corder-Bolz, Charles R., Dr., Southwest Educational Development Laboratory, Austin, June 1978.

Kniker, Ted, Prof., Immunology Department, University of Texas Medical School at San Antonio, June 1978.

Mondy, Lewis, Director of Family Planning, Texas Department of Human Resources, Austin, July 1978.

Northcutt, Norvell, Dr., and others. *Adult Functional Competency: A Summary*, University of Texas at Austin, Division of Extension, March 1975.

Price, Jim, Texas Air Control Board, Austin, June 1978.

Texas Commission for the Blind, Austin (from memorandum), June 23, 1978.

Texas Department of Community Affairs: County and Rural Services Division, Drug Abuse Prevention Division, Housing Division (from Census reports and Texas Real Estate Research Center information 1977, Texas A&M University), and Legal Division, Austin, July 1978.

Texas Department of Corrections, Data Processing, Huntsville, July 31, 1978.

Texas Department of Health: "Fact Sheet: National Immunization Initiative: Texas Immunization Program," and preliminary immunization data from Assessment Program: Licensed Day Care Centers, Austin, July 1978.

Texas Department of Health: Medical Evaluation of the Supplemental Food Program for Women, Infants and Children (WIC), Austin, July 1, 1977.

Texas Department of Health: Bureau of Vital Statistics, Division of Maternal and Child Health, Division of Water Hygiene, Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program, and Infectious Disease Control Division, Austin, July 1978.

Texas Department of Health: Bureau of Dental Health, "Tattletooth Evaluation Report," 1977-78, Austin.

Texas Department of Human Resources: Child Protective Services, Licensing Division, and Social Services Management System, Austin, July 1978.

Texas Department of Mental Health and Mental Retardation (from Developmental Disabilities State Plan), Austin, 1978.

Texas Department of Mental Health and Mental Retardation: Standards Compliance and Quality Assurance, Austin, July 1978.

## ARTICLES

Brenton, Myron. "Runaways," *Today's Education*, March-April 1977.

Campbell, Arthur A. "The Role of Family Planning in the Reduction of Poverty," *Journal of Marriage and the Family*, 1968.

"Child Beaters Confused," *Austin American-Statesman*, April 23, 1978.

"Child Pornography: Outrage Starts to Stir Some Action," *U.S. News and World Report*, June 13, 1977.

England, Paula; Lake, Linda; and McConnell, Suzanne. "Texas Women in the Labor Force," *Texas Business Review*. Austin: The University of Texas at Austin, Bureau of Business Research, Vol. 52, No. 5, May 1978.

Hansen, R. H. "Suggested Guidelines for Child Abuse Laws," *Journal of Family Law*, 1967.

"Incest rarely prosecuted, often unreported," *Beaumont Enterprise*, Nov. 4, 1977.

Mondale, Walter F. "The Family in Trouble," *Psychology Today*, May 1977.

"1 in 5 Houston Pupils Illiterate," *Austin American-Statesman*, Sept. 12, 1975.

Raskin, Julie and Carolyn Males. "Not all Run Away —Some are Throwaways," *Parade*, Aug. 13, 1978.

"Saving the Family," *Newsweek*, May 15, 1978.

"Sexual Revolution," *Austin American-Statesman*, June 25, 1978.

Streshinsky, Shirley. "How Divorce Really Affects Children: A Major Report," *Redbook*, Sept. 1976.

"Study Finds Suburban Living Fails to Prepare Children for Adulthood." *Re: Children*. Washington, D.C.: U.S. Department of Health, Education and Welfare, Jan.-Feb. 1978.

"30% of junior, senior HISD students illiterate, study estimates," *Houston Chronicle*, Jan. 22, 1978.

"What TV Does to Kids," *Newsweek*, Feb. 21, 1977.

"Why the Shocking Rise in Prostitution?", *Readers Digest*, May 1978.

"Witness ranks Houston with L.A. on child porno," *Houston Chronicle*, Sept. 14, 1977 and other newsclippings, testimony before Texas House Select Committee on Child Pornography, Austin, Sept. 1977.

## PUBLICATIONS

Action for Children's Television. *ACT-FACTS*. Newtonville, Massachusetts.

Bane, Mary Jo. *Here to Stay, American Families in the Twentieth Century*. New York: Basic Books, Inc., Publishers, 1976.

Conley, Robert W. *The Economics of Mental Retardation*. Baltimore, Maryland: The Johns Hopkins University Press, 1973.

Espenshade, Thomas. *The Value and Cost of Children*. Washington, D.C.: Population Reference Bureau, Inc., Vol. 32, No. 1, April 1977.

*46 Things You Need to Know about Texas Children: The Darker Side of Childhood.* Austin: Texas Department of Community Affairs, Early Childhood Development Division, Nov. 1, 1974.

Interagency Task Force on Youth Care and Rehabilitation. *Fourteen Recommendations, A Plan for Child and Youth Care in Texas*. Austin, Texas: Office of the Governor, Dec. 20, 1974.

"Is Anyone Out There Learning?" CBS News Television Documentary, Aug. 22-24, 1978.

Keniston, Kenneth, and the Carnegie Council on Children. *All Our Children: The American Family under Pressure*. New York: Harcourt Brace Jovanovich, 1977.

Lewis, Jerry M., Dr., et al. *No Single Thread: Psychological Health in Family Systems*. New York: Brunner-Mazel, 1976.

Legislative Budget Office. *Fiscal Size Up: Texas State Services, 1978-79 Biennium*. Austin, Texas: Legislative Budget Office.

*National Analysis of Official Child Neglect and Abuse Reporting*. Washington, D.C.: U.S. Department of Health, Education and Welfare, Jan. 1978.

National Academy of Sciences, National Research Council. *Toward a National Policy for Children and Families*. Washington, D.C.: National Academy of Sciences, National Research Council, 1976.

National Council of Organizations for Children and Youth. *America's Children 1976: A Bicentennial Assessment*. Washington, D.C.: National Council of Organizations for Children and Youth.

National School Public Relations Association. "Violence and Vandalism, Current Trends in School Policies and Programs." National School Public Relations Association.

Office of Court Administration. *Texas Juvenile Probation Report*. Austin, Texas: Office of Court Administration, June 1978.

Panel on Youth of the President's Science Advisory Committee. *Youth: Transition to Adulthood*. Chicago, Illinois: The University of Chicago Press, 1974.

Planned Parenthood Federation of America. *11 Million Teenagers*. New York: Alan Guttmacher Institute, Planned Parenthood Federation of America, 1976.

Rubel, Robert J. "What the Safe School Study Means to You," *American Educator*, July 1978.

Texas Commission on Alcoholism. "Alcoholism Facts." Austin, Texas: Texas Commission on Alcoholism, 1977.

Texas Commission on Alcoholism. "Women and Alcohol." Austin, Texas: Texas Commission on Alcoholism, 1977.

Texas Congress of Parents and Teachers. "Juvenile Justice, A Problem for Parents, Teachers and Communities." *PTA Forum*. Texas Congress of Parents and Teachers, June 1977.

Texas Council on Crime and Delinquency. "School Violence, Vandalism and Disruption—A General Outline." Austin, Texas: Texas Council on Crime and Delinquency.

Texas Department of Community Affairs, Youth Services Division. *Problems of Youth: A Paper Prepared for State Youth Advisory Committee*. Austin, Texas: Texas Department of Community Affairs, Youth Services Division, May 1978.

Texas Department of Health, *Texas Residence Live Births for 1977*. Texas Department of Health, 1978.

Texas Department of Health. *Venereal Disease: Answers to the Most Frequently Asked Questions about VD*. Austin, Texas: Texas Department of Health (Stock No. 6-43).

Texas Department of Health. *Vital Statistics 1977*. Austin, Texas: Texas Department of Health, 1978.

Texas Department of Human Resources, Planning Division. *Title XX Eligibles in Texas: 1978 Detailed Data*. Texas Department of Human Resources, Planning Division, Jan. 1978.

Texas Department of Mental Health and Retardation. *Data Book 1977*. Austin, Texas: Texas Department of Mental Health and Mental Retardation, 1977.

Texas Department of Public Safety. *Crime in Texas*. Texas Department of Public Safety, 1976 and 1977.

Texas Department of Public Welfare. *Texans and Human Services*. Austin, Texas: Texas Department of Public Welfare (now Texas Department of Human Resources), May 1977.

Texas Governor's Office, Criminal Justice Division. *1978 Criminal Justice Plan for Texas*. Austin, Texas: Texas Governor's Office, Criminal Justice Division, 1978.

Texas Handicapped Resource Project. *Laws Affecting Handicapped Children in Texas: A Summary*. Austin: Texas Department of Community Affairs, Early Childhood Development Division, July 1977.

Texas Medical Association. *A Statistical Report on Texas Population, Physicians, Births, Infant Deaths, Hospitals and Other Data*. Austin, Texas: Texas Medical Association, 1972.

Texas Medical Association and American Medical Association. *Distribution of Non-Federal Physicians by County, Texas*. Texas Medical Association and American Medical Association, 1975.

Texas Society for the Prevention of Blindness. *State of Texas Visually Disadvantaged Population Planning Handbook of Demographic Data and Proposed Client Summary Record*. Austin, Texas: Texas Society for the Prevention of Blindness, July 1977.

University of Texas at Austin, The. *Texas Fact Book 1978*. Austin, Texas: The University of Texas at Austin, Bureau of Business Research, 1978.

U.S. Bureau of the Census. *Statistical Abstract of the United States 1976*. (97th Edition) U.S. Bureau of the Census, July 1976.

U.S. Department of Health, Education and Welfare. "Alcohol and Your Unborn Baby." Washington, D.C.: U.S. Department of Health, Education and Welfare. DHEW No. (ADM) 78-521.

U.S. Department of Health, Education and Welfare. "Foster Care." Washington, D.C.: U.S. Department of Health, Education and Welfare. DHEW No. (OHD) 76-30068.

U.S. Department of Health, Education and Welfare. "Highlights from Drug Use Among American High School Students 1975-77." Rockville, Maryland: U.S. Department of Health, Education and Welfare. DHEW No. (ADM) 78-621.

U.S. Department of Health, Education and Welfare. "Neonatal Narcotic Dependence." Rockville, Maryland: National Clearinghouse for Drug Abuse Information, U.S. Department of Health, Education and Welfare, Feb. 1974.

U.S. Department of Health, Education and Welfare. *Public Assistance Statistics*. National Center for Social Statistics, Department of Health, Education and Welfare, 1974.

U.S. Department of Health, Education and Welfare. *Re: Children*. Washington, D.C.: U.S. Department of Health, Education and Welfare, Dec. 1977.

U.S. Department of Labor. *1975 Handbook of Women Workers*. Washington, D.C.: U.S. Department of Labor.

U.S. Department of Labor. *Working Mothers and Their Children*. Washington, D.C.: U.S. Department of Labor, 1977.

*U.S. Fact Book 1978: reprint of Statistical Abstract of the United States, 1977*. U.S. Bureau of Census. New York: Grossett and Dunlap, 1978.

## SURVEYS

*General Social & Economic Characteristics, Texas*, 1970 Census of Population, Bureau of the Census, U.S. Department of Commerce, Washington, D.C.

*General Social & Economic Characteristics, Texas*, 1960 Census of Population, Bureau of the Census, U.S. Department of Commerce, Washington, D.C.

*HouMAP, Houston Metropolitan Area Project, Survey of Houston-Galveston Planning Region*. Institute for Urban Studies, University of Houston, Houston, 1976.

*Local Government Survey*, Texas Department of Community Affairs, Early Childhood Development Division, and Texas Municipal League, Austin, April 1977.

Preliminary Results from the 1976 Survey of Income and Education, Bureau of the Census, U.S. Department of Commerce, Washington, D.C.

"Results 11th Forum on Moving," Atlas Van Lines 11th Annual Survey of Corporate Moving Practices. Evansville, Ind.: Atlas Van Lines, 1977.

Summary of Preliminary Results, National Survey of Children, Foundation for Child Development, New York, 1976.

Survey of Income and Education 1976, *Current Population Reports*, Series P-60, Bureau of the Census, U.S. Department of Commerce, Washington, D.C., 1978.

Texas Household Survey of Families with Children under Six, 1973, Texas Department of Community Affairs, Early Childhood Development Division, Austin.

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**Prepared by ........ Early Childhood Development Division**
**Texas Department of Community Affairs**
**in collaboration with the**
**Interagency Committee to Improve Services**
**to Children and Youth**
**and the Youth Services Division, TDCA**
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